



# COMMUNICATION AND ENGAGEMENT STRATEGY 2021 – 2024

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2.0	March 2019	April 2019	J. Treharne	Amended and updated to reflect changes in the trust's vision, goals and delivery approach. Also in response to the revised internal structure and external stakeholder landscape and the new approaches and initiatives needed to support delivery of the trust's strategic objectives through a programme of targeted communications and engagement activity.
3.0	July 2020	July 2020	J. Treharne	Amended to reflect the trust's response to the pandemic and associated revisions to our internal and external communications and engagement activities.
4.0	May 2021		J. Treharne	Amended and updated to reflect changes in the trust's vision, goals and delivery approach. Also in response to the revised internal structure and external stakeholder landscape and the new approaches and initiatives needed to support delivery of the trust's strategic objectives through a programme of targeted communications and engagement activity.

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# 1. INTRODUCTION

This document sets out the strategic direction for the communications, engagement and involvement activities of North West Ambulance Service NHS Trust (NWAS) for the period 2021 to 2024.

NWAS is one of the biggest ambulance services in the country and as a key service provider, has numerous stakeholders with whom it needs to have effective relationships in order to deliver the trust's vision and strategic goal.

The provision of urgent and emergency care for patients in the future is changing as detailed in the NHS Long Term Plan. A new service model is advocated that includes improving out of hospital care, reducing pressure on emergency services and providing digitally enabled care. When combined with the growth of Integrated Care Systems (ICS), this means that where, and how patients are assessed and treated for their care is changing to ensure services and organisations are effective and sustainable for the future.

This strategy has been reviewed to ensure it remains up to date, reflecting the current environment, and adapts to the varying needs of the organisation. This includes the impact of the Covid-19 virus, and a need for greater focus on both our staff and patients from mixed ethnic backgrounds, supporting the trust's plans to improve inclusivity and reduce inequalities.

This strategy will directly support the trust in delivering our evolving Urgent and Emergency Care Strategy which now incorporates NHS 111 First, and digital strategies whilst realising our vision of 'being the best ambulance service in the UK by delivering the 'right care, at the right time and in the right place; every time' for all patients. A key driver for the strategy is to close the gap between public perception and expectation of the ambulance service and what its future offer and operating model looks like.

Our Digital Strategy brings together the implementation of a significant number of digital enabling solutions to bring benefits for staff, patients and partners. Our future delivery of urgent and emergency care is dependent on these solutions.

The trust continues to improve its service model to ensure patients with serious or life-threatening emergency conditions receive timely, high quality care to maximise their chances of survival and recovery. By developing and implementing a robust integrated urgent care model, which provides highly responsive and personalised services for those people with non-life threatening conditions in the community, we will not only improve services for patients but also continue to help to ease the pressure on the emergency health system.

In this Covid-19 environment an ongoing focus for the trust is our management of calls that come in to 999 and NHS 111. Giving people advice and arranging treatment for them over the phone ('Hear and Treat') or on scene ('See and Treat') is vital to enable us to transform patient care. Whilst we have made considerable progress in the last few years, we will continue to work hard to increase the number of both Hear and Treat and See and Treat patients, when clinically safe to do so.

This will also reduce pressure on other emergency services and the number of patients we 'See and Convey' to hospital. In addition, this will have the benefit of reducing the number of patients who attend A&Es, which is vital to keep urgent and emergency care services available to those who really need them and, not overwhelm NHS services, particularly while social distancing remains in place to limit the spread of the Covid-19 virus.

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Effective two-way communication with the public and patients, staff and partners will improve the services NWAS provides, strengthen our reputation and achieve mutual understanding of our goals and the needs of our patients and staff. As advocated by the NHS England Patient and Public Participation Policy (November 2015), NWAS embraces a commitment to listening to and involving communities, their representatives and others, in the way we plan and provide our services.

The Communications and Engagement Strategy supports these aims by developing our vision and values into a compelling narrative about the changes that we want to make – with stories that can explain to our staff, patients and the public why and how we are changing. We will continue to persuade and support managers and clinicians to work together on improving quality; finding out the needs of our patients and local communities; and engage with them in order to redesign services that better meet their needs.

This strategy's main aims are to ensure good communication and engagement, place our patients at the heart of the organisation and support the delivery of excellent care for our communities.

## 2. SCOPE

The strategy covers the trust's strategic approach to communication and engagement with all key stakeholders in particular patients and the public, staff, partners, members, volunteers, political influencers and statutory organisations. It is delivered by the Communication and Engagement Team, which is split into 2 dedicated sub teams providing the full mix of communications and patient engagement services. The Communications Team provide staff and stakeholder engagement, press office, film; website campaign and event management, using the full range of digital and traditional media. The Patient Engagement Team manage the trust's Patient and Public Panel, its programme of community engagement and proactive patient experience in order to realise service improvements and enhance patient experience.

The strategy is monitored by the Strategy Partnerships and Transformation Directorate, Executive Leadership Committee and Board of Directors and is delivered via annual business plans. Patient and Public Panel and community engagement activities are also reported to the trust's Board, Quality and Resources Committee and Diversity and Inclusion Committee.

The strategy underpins the communication and engagement requirements of the trust's overall strategy, the integrated business and operational plans as well as individual directorate strategic objectives.

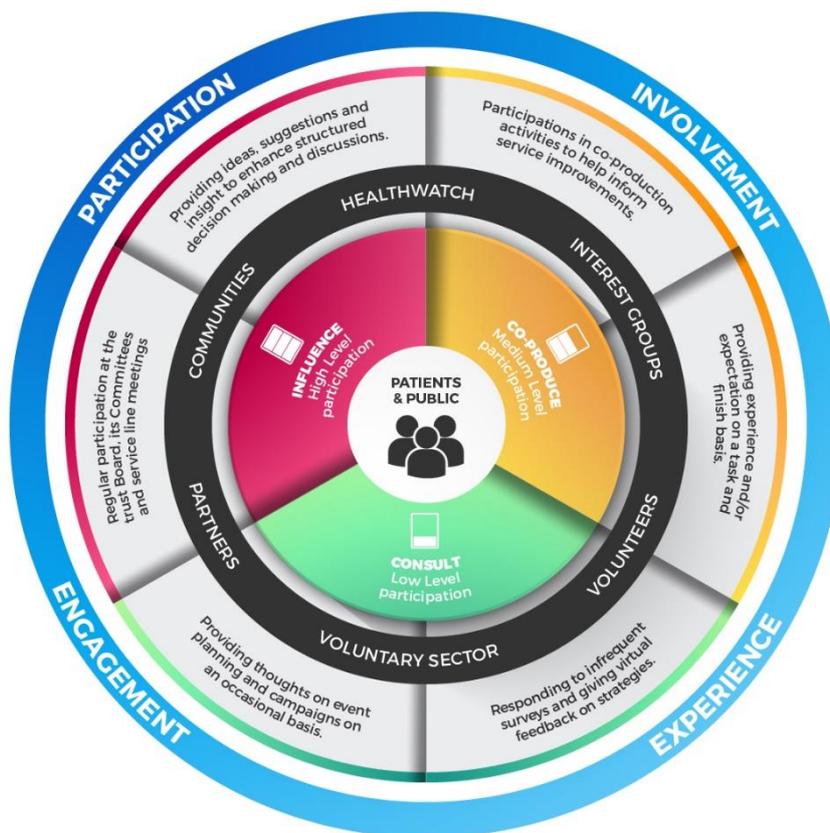
## 3. BACKGROUND AND CONTEXT

In spite of our high number of stakeholders, the size and spread of the area that we serve and the growing reliance on social media and other digital channels we continue to work hard to communicate with our communities using a range of face to face, electronic and digital channels. The arrival of Covid-19 and the associated required changes in behaviour including social distancing, lockdowns and home-working has necessitated considerable increased use of technology and the development of new virtual engagement activities. This strategy supports the continued exploration of innovative and efficient ways to engage and listen with as wide a group of stakeholders as possible, using their communication channels of choice.

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This approach has been enhanced through the trust’s investment in the development and implementation of a Patient and Public Panel. Effective engagement and genuine patient and public involvement in service improvement can be a challenge so by engaging with panel members based on the level of participation they are able to offer and in a clear and structured way, it is intended to maximise all levels of involvement. The trust has worked hard to continue to recruit, induct and offer meaningful engagement opportunities with Panel members throughout the pandemic.

The illustration at Figure 1. below shows patients and public at the heart of everything, the levels of involvement, the audience groups from which panel membership will be recruited from; examples of participation activities for each level of involvement and the overall themes of patient and public relationship with the trust.



**Figure 1: Patient and Public Panel**

The ways in which services are provided by the ambulance service have and will continue to change, to meet demand and to ensure patients receive the right response for their needs. This is relevant for all service areas the trust provides, emergency, urgent care including NHS 111 and patient transport services, emergency preparedness and resilience. These are supported by a number of corporate

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service teams including Strategy, Partnerships and Transformation, Human Resources and Organisational Development, Finance, Quality, Innovation and Improvement; Corporate Affairs and our Medical Directorate.

In 2017 the trust adopted the new ambulance response model which focused on getting the right resource for the patient’s needs first time, a significant change in terms of approach, fleet and culture. In the early part of 2019 NHS 111 online went live and the trust actively supported the national awareness campaign as well as rolling out a supporting North West campaign which included a mix of digital and face to face engagement work. In December 2020 the trust played a key role in the delivery of the new NHS 111 First model throughout the North West region. With this major initiative, it is essential that all stakeholders understand the services provided and have an opportunity to have their say in how these are developed and improved. The trust’s Communications Team has worked closely with NHS England and Improvement colleagues to develop a consistent regional approach and produce a range of assets, materials and communication toolkits to support this work.

The changing landscape of the NHS means that communication and engagement is now even more critical to ensure that stakeholders are aware of, and understand how the trust provides services. Learning from the Francis report (February 2013) clearly outlines the absolutely essential need for organisations to put patients at the heart of its services and listen to the views of patients and staff in order to deliver the very best standards of care.

The NHS Constitution establishes the principles and values of the NHS. It includes staff pledges, which state what the NHS expects from its staff and what staff can expect from the NHS. We view this as part of our commitment to being a good employer, making our staff feeling valued. NWAS will ensure that all engagement activities comply with the underlying principles of the Constitution.

The evidence to date also shows the North West has already suffered worse health inequalities and worse outcomes than other regions, which has been exacerbated by Covid-19. The virus has had a disproportionate impact on certain sections of the population, including those living in the most deprived neighbourhoods, people from mixed ethnic communities plus older people, people who have long-term conditions and those who are obese. Our stakeholder engagement plans must provide a focus on these areas in order to support a reduction in this effect.

The trust has a duty under the Health and Social Care Act 2006 to involve and consult with patients and the public in the way it develops and designs services. This strategy describes our approach to involvement, participation and consultation as well as our duty to warn and inform the public as a category 1 responder within the Civil Contingencies Act 2004.

We are committed to a Duty of Candour and this strategy reflects a position of openness and transparent in our communication with the public, when appropriate to do so.

## 4. WHERE ARE WE NOW?

### 4.1 ACHIEVEMENTS

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The trust has developed a robust communication and engagement function since its inception in 2006 and has demonstrated year on year delivery of the objectives set for communications and community and stakeholder engagement. The section below summarises the current position.

## Patient Public and Community Engagement

In 2020 the trust approved a new five year Patient Public and Community Engagement Framework 20/25, which is supported each year by an annual Patient, Public and Community Engagement Implementation Plan to ensure the trust engages with users who are representative of the communities it serves. Engagement activities focus on improving awareness and education whilst addressing any obstacles to access. This focus has become particularly important over the last year as the Covid-19 pandemic has highlighted health inequalities and barriers for some vulnerable patient groups in accessing services.

Over recent years the patient engagement team have visited many groups of patients with specialist conditions and or physical or emotional challenges as well as those of different cultures and both younger and more mature groups using our patient engagement board game. In 2020/21 almost 100 community engagements were undertaken virtually with community and patient groups across the North West region focusing on our response to the pandemic and also informing groups about the implementation of NHS111 first.

Engagement with our public, patients and community groups has also been enhanced with the further development of our Patient and Public Panel (PPP). The PPP has an infrastructure to enable patients and the public to become involved at a level that suits them however at present, all levels are engaging virtually until further notice:

- 'Consult': ad hoc feedback via surveys, on new policies, events and information materials,
- 'Co-produce': Helping to bring about service improvements through their involvement on a task and finish basis, using a co-productive approach and,
- 'Influence': Regularly attending trust meetings, committees and Board to give their perspective as a patient.

Despite the challenges from COVID, our PPP has continued to recruit new members and actively engage throughout the past 12 months via virtual platforms meaning we now have 154 Patient and Public Panel members fully inducted, with most already involved in the work of the trust. We have hit our initial original target of 125 for the PPP which is a great success for the trust.

Looking to the future, we will continue to build our PPP membership, with increasing targets – ensuring that we sustain and grow our membership each year. A key priority over the next twelve months will be to increase our youth membership (16-24) and to increase our representation from ethnic minority groups.

Despite the challenges posed by Covid-19, the PPP adapted to a new virtual way of engaging and made a huge difference to the work of the trust by contributing to a number of key projects and work streams including but not limited to:

- Supported the NHS 111 First initiative
- Worked with staff to refresh our values
- Worked with NHS England colleagues to improve the eligibility criteria for the Patient Transport Service (PTS).

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- Regularly supported at internal meetings such as our EOC Learning Forum and our Religion and Belief forum,
- Contributed to our new brand
- Refreshed PPP materials
- Listening to patient experiences to improve our services
- Took part in a PTS Mystery Shopper exercise in relation to our use of taxis.

Each year a PPP work is co-produced with members of the Panel that spans the work of the trust but also provides members with the opportunity to develop as individuals and experience different aspects of trust services. Upcoming opportunities for involvement include attending the High Intensity users group meeting, our EOC learning forum, and opportunities to learn more about the NWAS Green plan and the NWAS falls car project to name but a few.

Mainly during the summer months the team normally co-ordinates attendance at a range of community events across the region. These include Health Melas, the annual Disability Awareness Day, PRIDE events and high footfall County fairs and shows. A range of public health information and where possible operational staff and vehicles are usually on show to help engage with the public and increase awareness of ambulance services. As the pandemic restrictions are lifted it is hoped that it will be possible to resume these events in the future.

In addition, each year the trust produces communications and engagement plans to meet local, regional and national objectives, working with other partners across the region where possible and supporting national health awareness days and initiatives.

Our #Inside999 campaign aimed at tackling the myths and inaccuracies in circulation on social media during a prolonged period of high demand when we needed to both reassure the public and encourage them to use our services wisely. Using a mix of:

- social media content debunking common myths and misconceptions,
- statistics to demonstrate the reality of the increased demand levels compared to last year,
- educational ‘behind the scenes’ content together with
- videos with reassuring messages explaining what we were doing to manage demand and how the public could help support us
- front line staff telling their stories and
- national ‘stay at home’ covid-19 messaging,

we achieved a combined reach of 11 million, predominantly using NWAS’s social media sites – Facebook, Twitter and Instagram, significantly increasing our engagement as well as the number of ‘likes’ and ‘followers’ and at a zero budget cost.

In recent years the trust has received external recognition for its successful communication and engagement campaigns which have included:

- A Covid-19 Communications award for the ‘most effective essential worker communications’
- The Prolific North award for best campaign with ‘Once upon a call’
- ‘Best in house team’ category at the national CIPR awards.

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## Patient Experience

Patient experience is recognised nationally as a fundamental measure of quality healthcare provision. It is only through active listening, recording feedback and acting on patients' insight that the trust can respond and implement change to reflect patient needs. Our Patient Engagement Team engage with and obtain feedback from our patients across all service areas, including our Paramedic Emergency Service (PES), Patient Transport Service (PTS), the NHS 111 Service including NHS 111 First and our Urgent Care Desk.

We use a number of methods to elicit feedback including patient experience surveys, community engagement activities, focus groups and Friends and Family Test (FFT) comments cards on ambulances. We also offer the opportunity for our patients to provide FFT feedback comments using SMS text messaging.

FFT results are shared via the Integrated Performance Report with the trust's Board of Directors and as part of the quarterly Communications and Engagement Team dashboard report, in the regional bulletin and via social media options. Recommendations for service improvements are introduced, as appropriate, via 111, PES and PTS learning processes respectively.

Patient stories continue to be a powerful tool to describe patients' experiences and any learning outcomes that have been achieved. These are presented bi-monthly to the Board of Directors, Quality & Resources Committee, to staff as part of their mandatory training, and are part of education and awareness campaigns. We have developed our skills in relation to filming and editing within the wider communications and engagement team enabling the ongoing production of in-house patient stories.

Patient stories have continued during the pandemic although there have been some challenges due to lockdown in filming them and innovative ways of presenting have been used – such as using voiceovers to outline the story and filming them over MS Teams. Our patient stories have included experiences related to maternity, laryngectomy patients and increased learning and understanding within the organisation of their needs and how we have supported vulnerable patients and their families during the pandemic.

An analysis of the feedback received from patients provides us with focus areas for our work programme, themes for learning and the opportunity to make service improvements. Activities that we have recently undertaken include:

- Listening to advice and feedback from a range of our hard to reach and vulnerable patient groups on how to improve access to ambulance services eg the provision of translator services for 111.
- Working to understand how we could provide support to our vulnerable patient groups during the pandemic eg the provision of clear face panels to support patients who lip read and those with learning disabilities.
- Gaining insight into how the pandemic has highlighted health inequalities and concerns for some communities within our region by joining virtual meetings to provide reassurance that our services are safe, still available to them, how to access them and what to expect during the pandemic period .
- Ensuring that we stay in contact with and keep our patient, public and community groups informed with information relevant to NWS and the pandemic through the introduction of regular info bursts.

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- Continuing to seek patient feedback through a range of channels and adapting these to suit the changing landscape due to the pandemic eg digitalizing all our patient surveys.
- Increasing awareness with a range of our communities on our ambulance service provision.
- Consulting with a number of patient and community groups on the implementation of NHS111 first and using feedback to inform communication plans and approaches
- Working with our PPP members to improve services for the benefit of all our patients eg co production work on a revised ambulance service pictorial handbook.

## Social Media and Digital

The trust's social media sites have gone from strength to strength and have become an invaluable tool in engaging with the public, stakeholders and staff. The trust continues to increase its 'likes' on Facebook, and followers on Twitter and Instagram. During 2020/21 we successfully grew our collective social media network by 38%, adding 21,802 new Facebook followers, 9,507 new Twitter followers and 5,940 new Instagram followers.

For some years now we have successfully engaged with staff via a staff app. The app was developed for no cost and acts as a one stop shop for staff bulletins and links to useful systems such as rostering and expenses claims. Key messages can also be 'pushed' to staff to provide latest updates on essential topics. There have been numerous downloads to-date (approximately 4,500 in 2020/21) and promotion of the app continues.

The trust has continued to increase its digital offer by producing a range of short and longer films for use on social media, to bring patient and staff stories to life for Board, to be used in training and promotion and to share externally with stakeholders. In 2020/21 some 67 films were produced including Chief Executive and other Executive Director messages to staff, 111 and VCD recruitment films, seasonal messaging and demand support and campaigns e.g. anti-violence and aggression.

During the same year a programme of Facebook Live sessions were hosted by trust Directors on a new staff Facebook site. Most recently Team Talk live sessions delivered by the Chair and a Director have been added to our digital offer to share key information straight from the Board meeting and provide an opportunity for staff to ask questions in real time.

Another significant investment is the commissioning of a combined extranet site. This was launched in 2019/20. The site maximises film and creative and interactive content to showcase the excellent work of staff, provide information on our services and engage with all stakeholder groups. Recent additions to our external facing site include a new Patient and Public Panel area to enable Panel members to engage with each other as well as the trust together with exciting plans for a new Youth Zone and staff forums.

## Media Relations and Training

The Communications Team respond to over hundreds of media enquiries every year via the press office and out of hours on call service.

The team has shown effective handling strategies and media relations during times of intense public scrutiny, including major incidents, the trust's response to Covid-19 and the Manchester Arena Inquiry following the sad deaths of the 22 victims.

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Despite the challenges brought about by the pandemic, the trust took part in series 7 of the award winning BBC series, 'Ambulance'. The documentary is a fly on the wall view of the highs and lows of life on the frontline of a busy ambulance service and is well loved by the general public.

This was the third time the trust had partnered with the production team, Dragonfly, to make the series although this time, the project was made all the more complicated as the pandemic swept across the country. Close involvement of our Infection Prevention and Control Team ensured our patients, our staff and the production team were kept as safe as possible throughout filming.

The team 'narrated' each episode on social media as they were being aired, resulting in increased reach and engagement with the public. Further promotion included the profiling of staff in the local media.

In addition to day to day media support for interviews and requests from the press, specialist media training is also provided for both senior management and groups of advanced paramedics and operations managers. This is particularly useful during the busy winter period when the number of media messages increases as does the demand for interviewees.

The arrival of the Covid-19 virus has resulted in the NWS commanders being required to utilise their media training when they act as the organisation's mouthpiece communicating to the trust's stakeholders via broadcast and social media.

## Staff Engagement and Recognition

Communications and engagement with internal stakeholders is vital, to build a narrative and motivate and empower staff to get behind any forthcoming changes.

Following the arrival of the Covid-19 virus, trust guidance, information and processes were shared via dedicated Covid-19 bulletins and briefings. As the daily need for these heightened we developed a new Covid-19 information hub on the Green Room to ensure staff had access to the latest information and that navigation was swift and simple. Key clinical, operational and corporate communications included plans for staff testing, self-isolating and sickness absence, lateral flow and lamp testing and track and trace. . When the vaccine became available a dedicated communications plan was developed to promote uptake and reach a predominantly mobile workforce of over 6,500 people, spread across 5,400 square miles

Bespoke campaigns were developed to support different phases of our response to the pandemic including the trust's 'Beard Off' campaign which sought to persuade colleagues to lose their facial hair in order to ensure a snug, effective fit of personal protective equipment (PPE) and the 'more than just a colleague' campaign which focused on the need to follow basic IPC principles of washing our hands, covering our face and maintaining space. This used real case studies, photos and quotes from staff to highlight how those we work with are more than just colleagues, they are our friends, the people who are there to give us support, and the importance of looking out for each other.

Whilst other communications plans, been created to engage with staff on the trust's strategic approach to develop an integrated urgent and emergency care system together with the implementation of a significant number of digital enabling solutions were put on hold during the pandemic, communications support for key projects such as electronic patient records and the roll out of GTEC devices resumed as part of our recovery and restoration plans. Dedicated communication plans to support single primary triage, a new operational service model and transformational change to the way we work and deliver services are in train which will collectively produce benefits for staff, patients and our partners.

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The trust recognises the importance of staff engagement and has put in place a number of methods to ensure staff receive regular information, can provide feedback and are consulted on key service issues. Delivery of the new intranet (the Green Room) and the ability to host online staff forums has increased opportunities for engagement and involvement. Survey Monkey is also used to gauge staff views opinions on a variety of important topics eg a trust wide survey was undertaken to ascertain views on what had worked well during the pandemic, what might have been done differently, what measures introduced during the pandemic would we worth retaining and what we might now look to stop altogether. Staff were encouraged to feedback regionally and nationally on topical issues including taking part in the NHS People Pulse.

In the 2019 staff communication and engagement survey staff highlighted the importance of regular communication from senior management and following this our Executive Leadership Committee and the Chief Executive and Chair have hosted regular live question and answer sessions and record personal message to staff delivered through both electronic and digital media. In addition, the CEO hosts a frequent Senior Leadership Group meeting. In addition, we have developed the technology to play short films to staff in our Emergency Control Centres and this type of screened communication technology has been introduced into our NHS 111 Call Centres.

As mentioned above the benefits of using the staff app will continue to be promoted throughout the trust with it being accessible via our new GETAC device.

The trust undertook wide-ranging engagement on health and well-being initiatives. Due to the impact of Covid-19 additional health and wellbeing bulletins were produced namely: 'Wellbeing Wednesday' and 'Feel Good Friday' Thank you letters were delivered from the Chief Executive to the family members of staff, welfare vehicles, trust branded water bottles and a range of donated freebies were distributed to staff throughout the region and a thank you card was sent to every member of staff from the Executive Leadership Committee. An increase in responses to the NHS staff survey reflects the positive engagement carried out and the initiatives introduced following the previous year's results. We also saw an increase in the flu vaccination uptake, again, reflecting the engagement undertaken. We will continue to build on this positive outcome to aim for higher results in future years.

Advocating inclusivity and increasing diversity is a key driver for the trust and communications support is provided to all our staff networks including the Religion and Belief Forum, the Armed Forces Network, the LGBT group, the Disability Forum and most recently the launch of the trust's Race Equality Network. The groups' activities and events are promoted on all the trust's communication channels combined with dedicated communications plans to celebrate key dates, role models, constructive challenge, education and awareness.

The trust recognises and values the care and commitment shown by staff to patients on a daily basis, often in the most challenging of circumstances and regularly puts them forward for awards and other forms of recognition. A recent addition to this has been branded pin badges awarded to staff who deliver a baby, either in EOC or in person. The trust also has a successful staff STAR Awards ceremony to celebrate staff who that go the extra mile for their patients, colleagues and the organisation. This annual event is sponsored by the trust's partners. New recognition methods had to be introduced during the pandemic which included 'You're a Star' hampers for award winners, a trust 'Wellbeing day' and staff coin/pin badge for all staff in recognition of their outstanding commitment demonstrated during the pandemic.

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Tragically 2 colleagues died from covid-19 in 2020/21 and the trust did all it could to recognise and honour their sad passing in accordance with the wishes of the family including the dedication of a PTS and PES vehicle in their memory.

## Stakeholder Engagement

The trust is currently involved in and actively working through a large number of pathway and service reconfigurations across the North West. Communications and engagement activities are extensive, including but not limited to, ICS, commissioners, NHS trust providers, regulators, A&E Delivery Boards, local MPs and patient and public groups. It is important as the only ambulance service currently covering 28 CCGs (to become 3 ICS areas which will have a statutory legal footing from April 2022) in the North West that we are engaged in any potential discussions and plans to change services at a very early stage so any options can be impact assessed for safe and sustainable delivery. This shift from commissioner/provider relationships to area or system/provider relationships enables us to work in partnership and integrate with stakeholders and organisations to a greater extent.

Working with ICS also provides us with an important opportunity for collaboration to improve health and healthcare services for the patients and community we collectively serve. The trust regularly engages with organisations across its footprint to ensure that developments which impact us are fully discussed, and decisions made involve us. By the end of July the Trust will have three Partnership and Integration Managers to ensure NWAS manages the relationships with stakeholders and is involved in the dialogue, debates, discussions and decision making and represented on the right forums at both a place and system level.

The trust maintains good contact with local MPs, providing regular briefings, offering meetings and where possible the opportunity to accompany a crew on an ambulance or visit one of the trust's control centres. Strong links have been forged with many community groups, statutory bodies such as Healthwatch and Health Scrutiny Committees, commissioner and health and social care partners as well as Health and Wellbeing Boards in the region.

The team handles all of the trust's non incident related MP enquiries responding to approximately 50 letters each year. The team is also the main point of contact for parliamentary questions about the trust which come in via the Department of Health and NHS England/Improvement. In addition close to 300 freedom of information and environmental information requests are handled by the Communications Team each year. This is a statutory duty as defined by the Freedom of Information Act 2000 and the Environmental Information Regulations 2004 and one which requires 90% of requests to receive a response within 20 working days (subject to any relevant exemptions). In 2020/21 the team achieved a compliance rate of 96%.

All stakeholders receive a quarterly briefing and ad hoc briefings are issued on issues we feel need communicating quickly such as the trust's response to Covid-19, the CQC's visits and rating and periods of intense operational demand.

The team regularly facilitates representation at Health Overview and Scrutiny Committee (OSC) meetings and liaises with the administrators and managers to ensure attendance and the timely submission of reports and presentations.

The trust demonstrates its commitment to engaging and listening to the voice of communities and how we contribute to the sustainability and public health agendas through its annual engagement programme and attendance (where possible) at a wide range of community and health related events throughout the

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year. This community engagement also provides an opportunity to support our focus on health inequalities and inclusivity.

The trust undertakes an annual stakeholder mapping exercise and also reviews its targeted activity in line with the Patient, Public and Community Engagement Framework.

## 4.2 CHALLENGES AND OPPORTUNITIES

In terms of the challenges that are faced, the need for strengthened communications in a changing environment is always important and ensuring that this is done in the most cost effective and appropriate way. By the nature of the trust's business, it enjoys a high media profile and maintaining public confidence is a high priority.

The high level of demand is a particular challenge and there is a gap between public perception of what is expected from the ambulance service and the reality of what the future offer will be to ensure patients get the most appropriate response to their needs.

Often public perception is concentrated on the trust emergency service; however, the trust response to Covid-19 has highlighted the work of all our services providing an opportunity for a greater focus on NHS 111 and use of non-emergency transport to support urgent care.

The trust operates patient transport services in four of the five counties of the North West and has worked hard with the public and their representatives to ensure the service meets their needs, that they can feedback any issues and to introduce new health initiatives. The trust has been delivering the NHS 111 service contract since October 2013, first as a stability partner and then being awarded a 5 year contract in 2015. The contract has recently been extended and the advent of NHS 111 First will be reflected in future commissioning and contracting arrangements.

As already referenced, the level of interest in NHS performance and standards of care is high and maintaining public confidence and ensuring transparency will need to be at the root of all communication and engagement activity.

The large footprint covered by NWAS will always present a challenge for effective stakeholder engagement and public involvement. As ICS become embedded, we will need to maintain relationships with multiple provider collaboratives and ensure positive relationships within placed based partnerships, not only to work collaboratively but also to ensure joined up dialogue and avoid duplication of communication. It is important to get the right message, in the right forum to the right stakeholders.

In terms of staff engagement and internal communications, good progress has been made to increase the level of staff engagement through the delivery of more targeted communications, tailored to the needs of mobile staff with limited access to computers. This has included use of the staff app, producing more short films, offering live chat sessions via Facebook and introducing Team Talk live. Most recently we have added staff forum functionality to our Green Room to facilitate discussion on specific topics.

However, more is still needed to have a constant 'barometer' of staff morale and views. Increased use of digital technology to support a mobile workforce requires regular investment and effective management but is an enabler for improving staff communications and will be a driver for this strategy.

The capacity and capability of the Communications and Engagement Team also requires frequent assessment to ensure we continue to deliver an effective communications and engagement function for the trust whilst acknowledging the need to do things differently in order to work more efficiently. This

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may include further developing self-service models for example to meet the ever growing digital demand as well as to constantly evaluate our performance and deliver creative and innovative approaches to ensure our communications remain both fresh and engaging with our diverse stakeholders.

## 5. TRUST VISION, PRIORITIES AND APPROACH TO DELIVERY

Our vision is to be the best ambulance service in the UK by delivering the right care, at the right time, in the right place; every time.

Priorities:

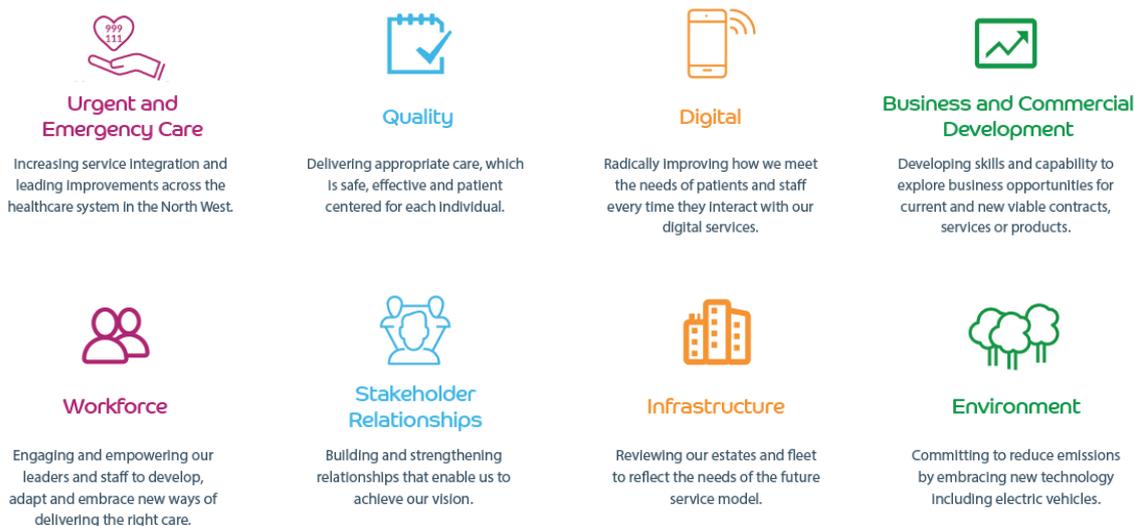


Figure 2: Our Vision and Priorities

### 5.1 APPROACH TO DELIVERY

We achieve our goals through the delivery of a number of enabling strategies, delivery programmes and plans in support of the 'Right Care', the 'Right Time' and the 'Right Place'; 'Every Time'. This Communications and Engagement Strategy comprises one of the supporting strategies which underpin the delivery of our goals as shown in Figure 3 below.

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**Figure 3: Enabling Strategies/Programmes and Plans**

## 5.2 VISION AND PRIORITIES - KEY MESSAGES

It is important to be clear what the key messages are that we want to communicate to our stakeholders and engage with them to influence our strategic direction.

The following key messages have been produced to support both our vision and priorities. The language and content of the messages will be adapted to reflect the views and needs of stakeholders.

### Our Vision - Key Messages

- Demand on ambulance services continues to grow, we need to better integrate our urgent and emergency care systems and work differently with our partners to provide the right care, at the right time and in the right place, every time for our patients.
- There is more to the ambulance service than a trip to hospital – patients may be treated and/or referred via a number of pathways following a 999 call.
- We work in partnership with our communities and commissioners to develop integrated healthcare services and promote health and well-being.

### Our Priorities – Key Messages

- We are working closely with our commissioners and other partner organisations to develop digital solutions to deliver high quality services that will meet the needs of the 21<sup>st</sup> century.
- Change is vital to provide sustainable, high quality urgent and emergency care in the future.
- The changes we are making will improve services for patients by ensuring no one is left needlessly waiting and where possible services will be delivered in their local community.
- We will do all we can do ensure both our staff and patients are safe during this pandemic
- We have clinicians working across all services to allow for earlier clinical decision making to support both patients and our staff.
- We have strengthened our non-emergency patient transport services, providing additional health information and referral services and strive to become a market leader and provider of choice.
- We have built confidence in our NHS 111 and more recently NHS 111 First service which offer patients excellent help for their urgent care needs.

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- We are supporting people to look after their own health and wellbeing in the community.

## 5.3 OUR VALUES

Our values form the foundation of and drive the whole organisation, ensuring we lead by example and create the right culture and conditions for patients to receive safe care every time.

Behaviours have been identified with staff to support the delivery of our values and demonstrate our commitment. Our values and our agreed behaviours are shown at Figure 4 below.



### WORKING TOGETHER.

We work together to understand and value every role in achieving our shared purpose. We live and breathe inclusivity, everyone matters.

#### THIS MEANS:

- I take care of myself and others: I take responsibility for my own health and wellbeing and share good practice with others.
- I am approachable: I visibly show how I support others, work across boundaries and break down silos.
- I live and breathe inclusivity: I am aware of my own bias and my impact on others and am prepared to challenge behaviour that is not inclusive or acceptable.
- I embrace a diverse range of views: I ensure that all voices are heard and actively seek out the opinions of those who may have a different perspective.



### BEING AT OUR BEST.

We challenge ourselves to be the best we can be. We are curious and push boundaries to improve everything we do.

#### THIS MEANS:

- I turn up: I bring my whole self to work each day and take ownership for my actions and behaviours.
- I am responsible for my own learning and development: I continually build on my knowledge, skills and experience to be the best I can be at work.
- I am brave and bold: I continually learn when things go well and when they don't. I speak up if something isn't right.
- I am professional: I am adaptable and forward thinking and go the extra mile if required. I take pride in how I work.



### MAKING A DIFFERENCE.

We make a difference through doing the right thing by our staff, patients, partners and communities. We act with compassion and kindness.

#### THIS MEANS:

- I behave with compassion and kindness: I treat everyone based on their individual needs and culture. I show empathy and do not judge others.
- I act with integrity: I do what is right, not what is easy. I readily share information and knowledge and deliver on my commitments.
- I am optimistic: I am proactive in recognising and celebrating my own and others' success in achieving outcomes.
- I listen with intent: I listen to understand before I speak. I create space to listen to others.

Figure 4: Our values and agreed behaviours

## 6. COMMUNICATIONS AND ENGAGEMENT STRATEGIC APPROACH

### 6.1 COMMUNICATION PRINCIPLES

All corporate communication activities will reflect the trust's values and the following principles:

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- An emphasis on two way communication mechanisms and relationship management
- Information which is clear, accurate, consistent and uses appropriate language
- Dialogue is respectful and constructive
- Communications and engagement delivered in partnership with commissioners, health care providers and other stakeholders wherever possible
- Timely communications with our staff in advance of other stakeholders, wherever possible
- Open and honest communication that demonstrates the trust's accountability to its stakeholders
- Communications that reflect the needs of patients, the public and our staff
- Adherence to the duties outlined under the Civil Contingencies Act (2004)
- Promoting improved health outcomes and reducing inequality
- Communication and engagement activities which demonstrate value for money.

All communications will comply with legislation in terms of the Data Protection Act 2018, the EU General Data Protection Regulations 2018 (GDPR), the Freedom of Information Act 2000 and equality and diversity legislation. All promotional work will be carried out in accordance with the Department of Health's Code of Practice for promotion of NHS Services, published in March 2008.

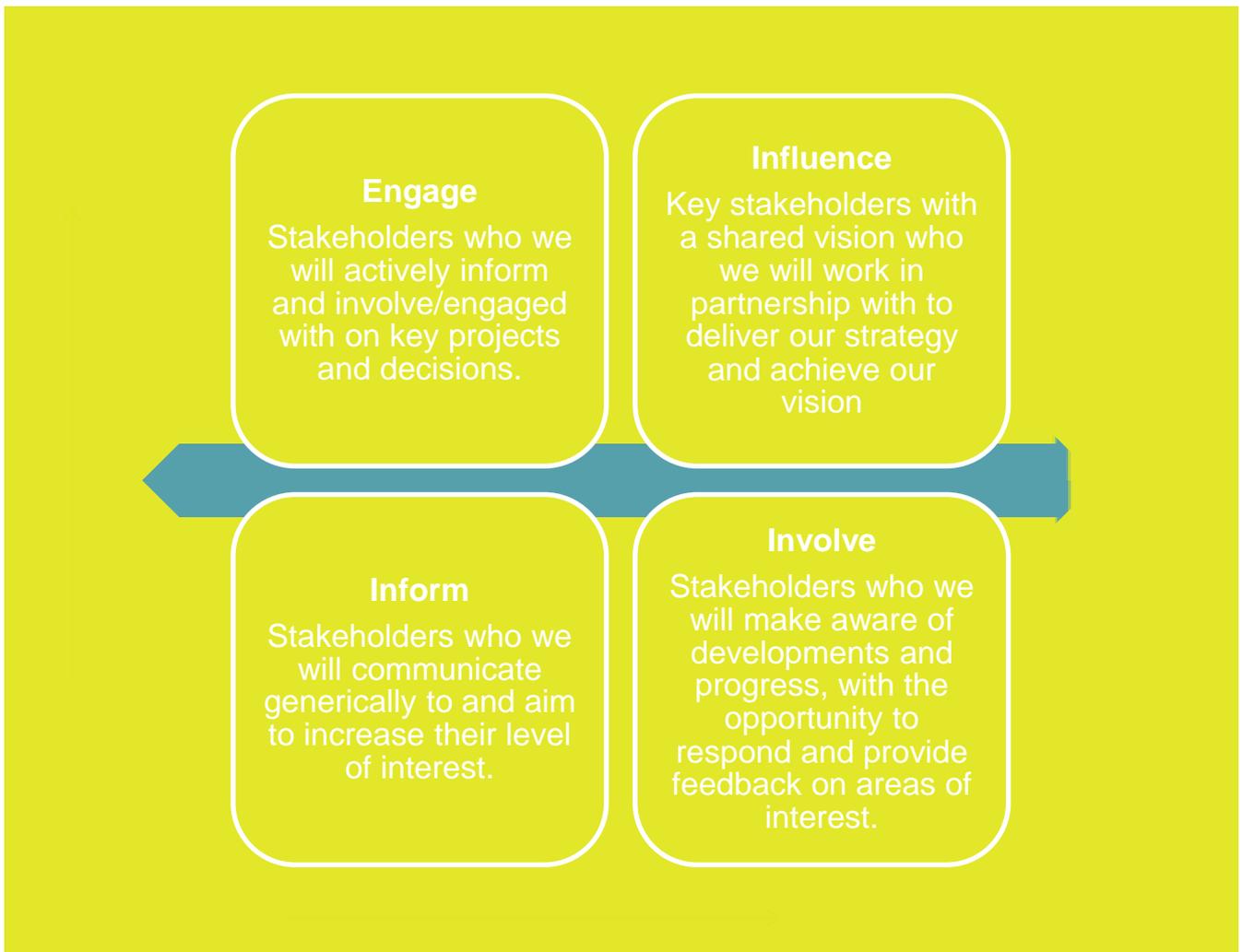
## 7. STAKEHOLDERS AND AUDIENCES

The trust has a diverse range of stakeholders with varying needs and interest in the organisation. Communication must be tailored to suit their differences and requirements – in terms of age, involvement or connection with the service, behaviours, where they live, lifestyle and beliefs etc. - in order for there to be genuine understanding and engagement.

Using stakeholder mapping to identify the level of interest and influence that individuals and organisations have, we can prioritise those we need to engage more closely. The concept allows us to align communications activities, key messages, delivery channels and frequency with the needs of each stakeholder group and ensures our approach is based on insight to be as effective as possible.

Figure 5 below shows a stakeholder mapping concept based on each stakeholder groups' level of interest in the trust and their influence. The table at Figure 6 below shows our communication approach to each.

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**Figure 5: Stakeholder Mapping**

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Aim of communication	External and Professional	Internal	Public and Patient
<p><b>To influence</b></p> <p><i>Key stakeholders with a shared vision who we will work in partnership with to deliver our strategy and achieve our vision.</i></p>	<p>NHS England/Improvement</p> <p>Care Quality Commission</p> <p>Public Health England</p> <p>Lead commissioners</p> <p>Local A&amp;E delivery boards</p> <p>ICS</p>	<p>Board of Directors</p> <p>Executive Leadership Committee</p> <p>Trade union representatives</p>	<p>Patient and Public Panel</p>

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<p><b>To engage</b></p> <p><i>Stakeholders who we will actively inform and involve/engaged with on key projects and decisions.</i></p>	<p>North West Members of Parliament</p> <p>Local Clinical Commissioning Groups</p> <p>Overview and scrutiny committees in the North West</p> <p>Healthwatch and interest groups</p> <p>Local resilience forums Emergency services</p> <p>Higher education institutes</p> <p>Out of hours providers</p> <p>Health and wellbeing boards</p> <p>Urgent care networks</p> <p>Public Health England</p>	<p>Senior managers</p> <p>Service leads</p> <p>Clinical leaders</p>	<p>Patients from priority groups – children, mental health, stroke etc.</p>
<p><b>To involve</b></p> <p><i>Stakeholders who we will make aware of developments and progress, with the opportunity to respond and provide feedback on areas of interest.</i></p>	<p>NHS provider organisations</p> <p>Voluntary ambulance services</p> <p>Government ministers</p> <p>Local councillors</p> <p>Nursing and care homes</p>	<p>Middle managers</p> <p>Clinical supervisors</p> <p>Human Resources and Organisational Development</p>	<p>Other patients</p> <p>Service users (friends, family and carers)</p>

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<b>To inform</b>  <i>Stakeholders who we will communicate generically to and aim to increase their level of interest.</i>	Media (local and trade)	All employees	North West population
	Health care professionals	Community first responders	Community groups (including hard to reach groups and those with specific interests)
	Relevant charities e.g. British Heart Foundation	Volunteer car drivers	
	Parish/Town Councils		

**Figure 6 : Communication Approach**

When planning communications activities, consideration also needs to be given to the requirements of the relevant service line or project. Where possible therefore, stakeholder mapping is undertaken during the planning phase of any communications campaigns or activities.

Relationships with stakeholders will evolve and change depending on a wide range of factors both local and national. We review our list of stakeholders annually to identify gaps and assess any changes in relationships.

### Supporting the wider NHS

We target communications, where appropriate, to priority areas as identified in the NHS Long Term Plan and most recently in our approach to planning Covid-19 communication and engagement activities.

We will also consider the communication needs of hard to reach groups in order to tackle health inequalities in mixed ethnic communities and those who live in deprived areas.

## 8. HOW WILL WE DELIVER THIS STRATEGY?

Our strategic approach is to consolidate existing communication and engagement practices whilst developing new communication initiatives to support the delivery of the trust's strategic objectives. This is achieved via the following communication and engagement aims:

- Service users and potential users will have improved understanding, and will be meaningfully engaged and involved in service design, to improve quality and patient experience
- Patients, the public and their representatives will know what to expect from the ambulance service and have high levels of confidence in its service
- All staff can relate to the trust's vision and values and feel that they are listened to, involved in trust decisions and valued
- All stakeholders and partners fully understand and are engaged with the evolving operational model and digital objectives for NWS
- NWS continues to have a trusted brand profile which reflects its vision and values and the main services it represents
- We are an employer of choice for professionals pursuing a rewarding career
- Information is shared by the trust which meets the needs of its stakeholders and promotes openness and transparency

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- Be the provider of choice for NHS 111 and PTS services
- Public confidence is maintained in the trust's abilities to publicly warn and inform during major incidents and during periods of increased demand or service escalation

The above aims will be delivered through the annual business delivery plans of the Communications and Engagement Team. The plans include detailed actions, timeframes and measures of success.

## 9. STRATEGY ENABLERS

The communications and engagement team will use a number of channels and techniques to support delivery of this strategy including:

- social, on line and digital media channels and campaigns
- channel management and correspondence
- horizon scanning and news gathering
- stakeholder profiling and mapping
- consultation exercises
- watching briefs and specific handling strategies
- stakeholder impact assessment techniques
- political monitoring
- regular stakeholder briefings
- staff and patient feedback via traditional and new media
- patient involvement via the patient and public panel
- social marketing and behavioural insight techniques
- community engagement programmes
- creative campaigns and marketing collateral
- written and face to face communications
- patient and public information
- press releases and media statements
- videos, stories and filming
- events and conferences

## 10. RISKS

A number of risks have been identified in the delivery of this strategy. These include:

- Capacity to deliver effective communications and engagement activities across the large footprint and with a high number of stakeholders
- The ability to effectively engage with staff because of the nature of a mobile workforce and some of the technology limitations.
- The changing NHS environment and financial climate requiring increased communication levels to support our urgent, emergency care and digital strategic objectives.
- The impact of Covid-19 on our ability to hold face to face communication and engagement activities

Any specific projects within the delivery plans will link to the trust's risk register.

All risks are captured on the trust wide corporate risk register which is populated from the risk assessments carried out at all levels and across all directorates within the trust. These are monitored

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through the relevant directorate and service area risk registers. It is recognised that the type and levels of risk will change over time and will be monitored accordingly.

## 11. IMPLEMENTATION – ANNUAL DELIVERY PLAN

The strategy and its objectives will be delivered through annual delivery plans which will be published alongside the strategy with regular progress reports. The strategy will be monitored by the Executive Leadership Committee and Board of Directors.

## 12. RESOURCES

The communications and engagement team has a finite non-pay budget to support communication and engagement activities. The team will ensure all activities are within planned budget spending and best use of resources and value for money are provided. Any requirement for additional funding will be subject to the approved business case process.

The strategy will support the delivery of the directorate’s required cost improvement plan.

The team’s structure is shown at figure 7 below.

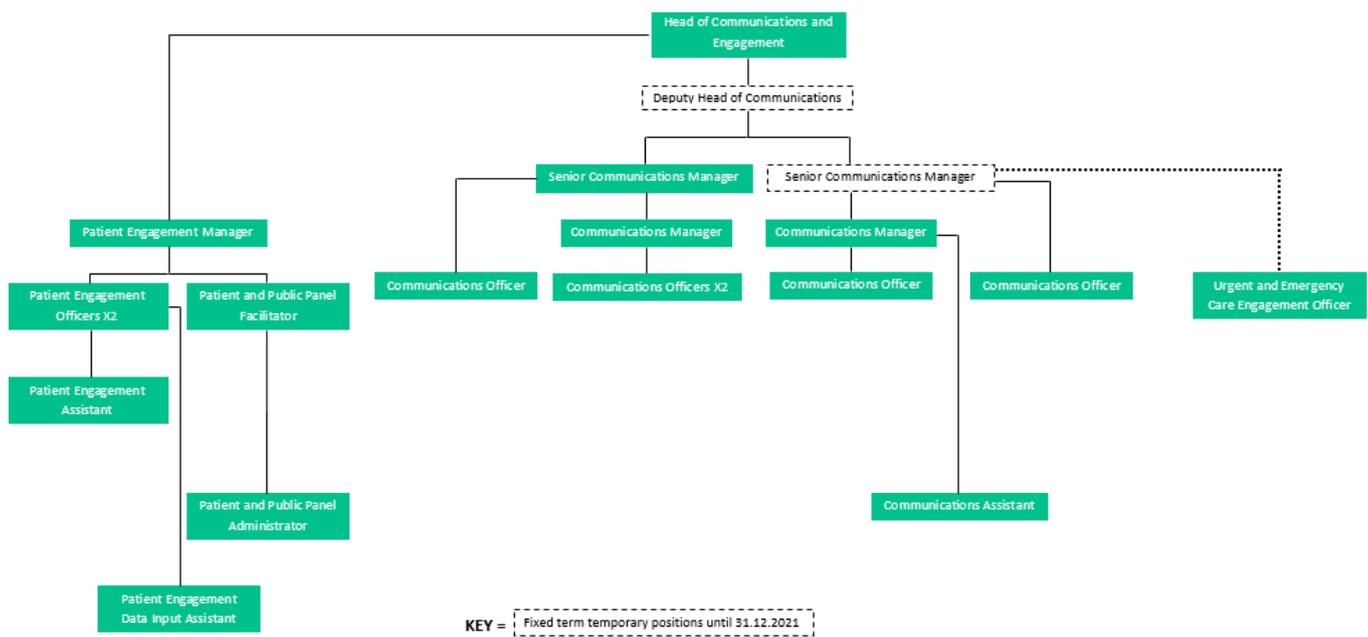


Figure 7: Communications and Engagement Team Structure

## 13. MONITORING AND EVALUATION

The strategy will be delivered through annual action delivery plans.

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Progress reports on the strategy and delivery plans will be presented to the Executive Leadership Committee and Board of Directors on an annual basis. Quarterly updates will be provided to the Executive Team via the communications and engagement dashboard and verbal updates on a monthly update via the Director of Strategy, Partnerships and Transformation.

Specific project updates will also be shared with relevant Committees or Groups as appropriate e.g., the patient and public panel's activities will be presented to Quality & Performance Committee.

The progress reports will focus on delivering the objectives outlined in section 8.

## 14. COMMUNICATING THE STRATEGY

The Strategy will be emailed out to Directors/senior managers/heads of service and will be presented to all service line senior management teams.

The Strategy will be published on the trust's extranet for stakeholders and staff to view and an article included in the external stakeholder briefing and the internal Bulletin.

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