

**DRAFT  
COMMUNICATIONS AND  
ENGAGEMENT PLAN**

**SERVICE DEVELOPMENT PROPOSAL  
FOR THE EMERGENCY MEDICAL RETRIEVAL  
AND TRANSFER SERVICE (EMRTS CYMRU)  
WORKING IN PARTNERSHIP WITH THE  
WALES AIR AMBULANCE CHARITY**

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## 1. Introduction

### Mission



To provide advanced decision-making and critical care for life or limb-threatening emergencies that require transfer for time-critical treatment at an appropriate facility

We deliver lifesaving, advanced medical (critical) care to people across Wales whenever and wherever they need it

The Emergency Medical Retrieval and Transfer Service (EMRTS Cymru) is:

- clinically led and managed
- motivated by benefits to patients
- provided in partnership with the Wales Air Ambulance Charity
- an all Wales service – 72% of patients who need the service receive it
- One of the best services in the world and changes have been identified to make it better – which would reach 88% of those who need it
- Able to provide treatment at the scene which would otherwise be required in a hospital setting leading to the time factor being less important as part of the whole patient journey
- Trying to make the best use of the resources available
- Constantly developing and fundamentally changed from 2015 onwards

## **2. Purpose of the document**

The purpose of this document is to describe the approach the Emergency Ambulance Services Committee (EASC) will take in engaging with key stakeholders to decide on the service development opportunity for the Emergency Medical Retrieval and Transfer Service (EMRTS Cymru) working in partnership with the Wales Air Ambulance Charity (WAAC).

This document summarises the context for why the service development opportunity has arisen and outlines the key themes and questions that will be posed to stakeholders through the engagement process. In addition, it identifies and prioritises the key interest stakeholder groups and defines the approaches of the stakeholder engagement activities.

A further document (Issues paper or Engagement document) will be developed which aims to help stakeholders understand the proposed service development, what to expect from the engagement process, how they can have their say and how long the process will take.

To ensure this engagement process is meaningful consideration will be given to the form of communication used to reflect the various stakeholder groups. Information will be produced where needed for specific audiences and may differ accordingly.

## **3. Background**

The Emergency Medical Retrieval and Transfer Service (EMRTS Cymru) was formally established on the 27 April 2015. The service was commissioned 'to provide advanced decision making & critical care for life or limb threatening emergencies that require transfer for time critical specialist treatment at an appropriate facility'.

The service represents a joint partnership between NHS Wales, the Wales Air Ambulance Charity Trust (WAACT) and the Welsh Government.

The service was initially commissioned by the Welsh Health Specialised Services Committee, however this function transferred to the Emergency Ambulance Services Committee (EASC) on 1 April 2016.

The EASC website can be accessed here: <a href="https://easc.nhs.wales/">https://easc.nhs.wales/</a>
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## **Commissioning Intentions**

The Emergency Ambulance Services Committee agreed Commissioning Intentions for 2022-23 for EMRTS Cymru which includes:

### **EMRTS Commissioning Intention 1- Service Expansion**

**CI1a – Enhanced CCP-led response** – Building on the findings of recent winter initiatives and demand and capacity planning undertaken within the service, support the implementation of an enhanced daytime response that will ensure more effective use of resources, improve service quality and the patient experience and provide opportunities for workforce development.

**CI1b – Planning** – Build on the implementation and consolidation of Phase 1 of the EMRTS Service Expansion project, working collaboratively with commissioners to plan the implementation of the remaining phases of the EMRTS Service Expansion programme.

### **CI2: Adult Critical Care Transfer Service (ACCTS)**

**CI2a Service Delivery** – The ACCTS team will continue to manage ongoing service delivery and will ensure robust performance management with a focus on outcomes, value, quality and safety of service delivery.

**CI2b Engagement** – Building on established relationships, continue to engage with all stakeholders to review and strengthen the service model(s) implemented to maximise the clinical outcomes, value, quality and safety of service delivery.

**CI2c Evaluation and Review** – Undertake evaluation and review relating to the implementation of the ACCTS, reporting on lessons learned, service activity and providing the required assurance regarding the realisation of anticipated outcomes and benefits going forward.

### **CI3: Service Evaluation**

**CI3a Improvement Plan** – Develop and implement an improvement plan in response to the EMRTS Service Evaluation Report.

### **CI4: System Transformation**

**CI4a Demand and Capacity Strategy** – To continue with the work on a collaboratively developed demand and capacity strategy will set out the ongoing arrangements for proactively undertaking this work for the next decade, this will include the use of forecasting, modelling and health economic evaluations.

Link to Commissioning Intentions 2022-2023:

<https://easc.nhs.wales/commissioning/emrts/emrts-commissioning-intentions-2022-23/>

#### **4. Context outline**

EMRTS Cymru has been developed to bring specific benefits to Wales, specifically:

- Reductions in geographical inequity for patients with critical care needs
- Health gains by improving clinical outcomes
- Improved clinical and skills sustainability – improving the clinical skills, recruitment and retention in key acute care areas.

There is also a service provision for the enhancement of neonatal and maternal pre-hospital critical care (both for home deliveries and deliveries in free-standing midwifery-led units)

The service provides a highly-trained critical care team comprising Consultants (from an emergency medicine, anaesthesia and intensive care background) and Critical Care Practitioners (CCPs) (including paramedics and nurses). The service has two main areas of activity:

- Pre-hospital critical care for all age groups (i.e. interventions / decisions that are outside standard paramedic practice)
- Undertaking time-critical, life or limb-threatening adult and paediatric transfers from peripheral centres for patients requiring specialist intervention at the receiving hospital.

The Wales Air Ambulance Charity (WAAC) delivery objectives are to:

- Enable the delivery of 24/7 pre-hospital emergency department-standard care to the people of Wales.
- Ensure that the service is delivered in the most cost-effective manner, maximising the impact of our funds across Wales.
- Proactively seek out opportunities to improve patient care and outcomes.
- Recognise the unique relationship we have with the people of Wales, ensuring our activities reflect the needs of the different communities we serve.

Link to the Wales Air Ambulance Charity Website:

<https://www.walesairambulance.com/>

#### **Why a Strategic Review now?**

EMRTS Cymru and the Wales Air Ambulance Charity (WAAC) are currently undertaking a wide-reaching and in-depth strategic review of the Wales Air Ambulance service. EMRTS Cymru' (in partnership with WAAC) five-year service evaluation, published in March 2022, offered strong evidence that its advanced medical provision is delivering significant benefits for patients and for NHS Wales. More patients are being attended and are surviving than ever before.

Knowing that it is delivering world-leading advanced critical care, now it is important for EMRTS Cymru and the WAAC to understand whether the service is meeting as much of its demand as possible, with the resources that it has.

As part of this work, to deliver the commissioning intentions set by the Emergency Ambulance Services Committee (as the commissioner of the services), EMRTS Cymru has been conducting a detailed analysis of the service's delivery data, its current demand, and its base utilisation to understand whether the service is delivering the most efficient and effective service for the people of Wales.

For the Wales Air Ambulance Charity to deliver the most effective service for Wales, this was an opportunity to review the:

- 21-year-old service
- Potential to enhance service delivery
- Aviation procurement.

To do this by:

- understanding the future demand on the service
- researching and identifying opportunities that will improve service delivery and patient outcomes (including the analysis of past performance)
- ensuring the right infrastructure (bases/landing sites) to facilitate effective service delivery
- ensuring that they maximise every penny donated by Charity supporters and through public funding to EMRTS Cymru.

Research and analysis methods used included:

- NHS data and analytics - mission data is collected and analysed to understand current activities and unmet demand.
- External analysis has been carried out by CSAM Optima Predict analytics to understand the impact of different service delivery and infrastructure models.
- External consultancy - specialist independent aviation knowledge and expertise is being provided by Aeroptimo.

### Aim of the Joint Outcome

The agreed joint outcome of EMRTS Cymru and WAAC was to determine the optimal operational configuration and physical footprint for the lifesaving services that bring the greatest benefit to all of the people of Wales using all available resources and information.

The Service Evaluation of the service provided by EMRTS Cymru was carried out by Swansea University between 2015 and 2020 and the headlines included:

- **Increased chance of survival** - A significant 37% reduction in mortality after 30 days for patients with serious blunt trauma.
- **Flying emergency department** - 63% of patients (6,018) had treatments at the scene of their incident which previously they could only have within a hospital (including blood transfusions and anaesthesia).
- **Taking the patients to the right place, first time** - Thanks to advanced decision-making, 42% of patients bypassed local hospitals to be taken directly to specialist care – saving time for the patient and extra resources for the NHS.
- **Attracting consultants into Wales** - 12 new consultants had been recruited into Wales due to the attraction of working with Wales Air Ambulance (2020).

Service Evaluation of the Emergency Medical Retrieval and Transfer Service (EMRTS) Cymru

<https://emrts.nhs.wales/about-us/key-documents/emrts-service-evaluation-2021-pdf>

Summary of the service evaluation via - [Seriously Injured Trauma Patients have an Increased Chance of Survival thanks to Wales Air Ambulance | Welsh Air Ambulance Charitable Trust](#)

## **Purpose of the Strategic Review**

The review is a very important process as some elements of the service have significantly changed over the past two decades. However, as the service's medical provision and transportation have evolved, some of its base infrastructure remains the same as when it was introduced over fifteen years ago and is potentially restricting its ability to meet current demand. Additional reasons for commencing this review are related to the Charity's ongoing aviation procurement and the global rise in the cost of goods and services.

WAACs current aviation contract is due to terminate within the next eighteen months and the procurement process offers a once-in-a-decade opportunity to review the current service provision and include this in the Request for Proposal (RFP) and the final contract with the successful bidder.

It is important to point out that this is not a cost-cutting exercise. The aim is to ensure that EMRTS Cymru / WAAC is delivering the best possible service with the resources that they have.

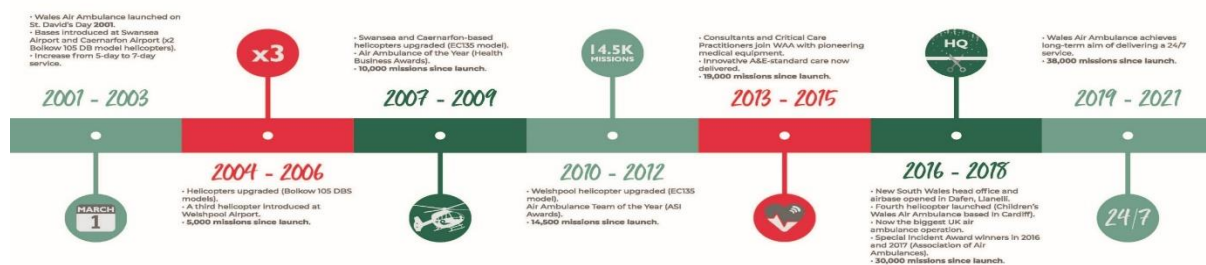


## 5. Progress of the EMRT Service to date

Over the last year, the Charity commenced a Strategic Review which involved Trustees, the Senior Management Team and staff across the Charity. Partners like the EMRTS Cymru team and other stakeholders were consulted and surveyed. The work considered the opportunity of the re-procurement of the aviation partner and the imminent change of the existing contract arrangements with airbase leases aligned with this term.

The publication of the Five-year Service Evaluation by Swansea University provided independent review information for the service and also the results provided the change for some parameters including that success is now aligned to getting the right medical resource to the patient rather than getting the patient to the right medical resource.

The EMRTS Service has changed:



### 2001-2003

- Wales Air Ambulance launched on St. David's Day 2001.
- Bases introduced at Swansea Airport and Caernarfon Airport (x2 Bolkow 105 DB model helicopters).
- Increase from 5-day to 7-day service.

### 2004-2006

- Helicopters upgraded (Bolkow 105 DBS models).
- A third helicopter introduced at Welshpool Airport.
- 5,000 missions since launch.

### 2007-2009

- Swansea and Caernarfon-based helicopters upgraded (EC135 model).
- Air Ambulance of the Year (Health Business Awards).
- 10,000 missions since launch.

### 2010-2012

- Welshpool helicopter upgraded (EC135 model).
- Air Ambulance Team of the Year (ASI Awards).
- 14,500 missions since launch.

### 2013-2015

- Consultants and Critical Care Practitioners join WAA with pioneering medical equipment.
- Innovative Emergency Department-standard care now delivered.
- 19,000 missions since launch.

### 2016-2018

- New South Wales head office and airbase opened in Dafen, Llanelli.
- Fourth helicopter launched for inter-hospital patient transfers, based in Cardiff.
- Now the biggest UK air ambulance operation.
- Special Incident award winners in 2016 and 2017 (Association of Air Ambulances)
- 30,000 missions since launch.

### 2019-2021

- Wales Air Ambulance achieves its long-term aim of delivering a 24/7 service.
- Presented with a Social Impact Award (Institute for Collaborative Working).
- 40,000 missions since launch.

In respect of the EMRTS, the following key milestones relating to its development are listed below. Whilst not in scope of this review, we have included ACCTS for context as there is a degree of crossover in work, with both teams attending a number of time-critical transfers, freeing up the EMRTS teams for primary (999) calls or other transfers. This is subject to a future evaluation as part of the Commissioning Intentions referenced earlier.

- April 2015 - EMRTS becomes operational (Swansea Airport, Mid Wales Airport) 08:00-20:00
- 2016 – South Wales base moves from Swansea Airport to a purpose-built site in Dafen, Llanelli
- July 2017 - North Wales Expansion to Caernarfon Airport
- August 2017 - Helimed 67 introduction (initially in Dafen)
- December 2017 - Cardiff Heliport expansion
- Winter 2018, 2019, 2020 – temporary road-based twilight service (to 2am as additional team)
- July 2020 – 24-hour cover from Cardiff by road
- December 2020 – 24-hour cover from Cardiff by air
- August 2021 - ACCTS South (12-hour from Cardiff)
- October 2021 - ACCTS North (24-hour on call from Bangor)
- April 2022 - Cardiff day shift

## 6. Current situation

Phase 1	Activity	Including
Analysis and connections	Local and national public perceptions report to understand current behaviours	CASC meetings with key stakeholders – particularly CHCs who will decide on what and how Clearly local communities are very worried about the loss of their local air base Lack of understanding of current service and how it operates Not a first responder and not time critical to arrive at scene
	Analysis of successful engagement methods with key audiences and further opportunities available	To be further developed with comms and engagement leads
	Form close connection and regular communications with local communications teams	Lee Leyshon CTMUHB Sue Bailey SBUHB Adrian Osborne PTHB Helen Stevens-Jones BCUHB Steven Stokes WAAC NHS Wales Heads of Communications (Stephen Harray attending a meeting on 11 Nov)
	Public feedback communications	Plan to do a regular update and key feedback opportunities following milestone meetings
	Connection with informatics teams to measure success of communications	Ricky Thomas will support the work Potential to link with other information
	Case for change / proposal	Developed by the EMRTS Team
	Risks	<ul style="list-style-type: none"> <li>• Under utilisation</li> <li>• Unmet need</li> <li>• Ability to optimise location</li> <li>• Lack of support from communities across Wales</li> <li>• Maintaining key skills of staff (not enough missions)</li> <li>• Impact on key partner of the service – Charity particularly loss of support from communities</li> </ul>

Phase 1	Activity	Including
	Benefits	<ul style="list-style-type: none"> <li>• More lives saved</li> <li>• All Wales service- not constricted by location</li> <li>• Extended hours of service</li> <li>• More opportunities for staff development and maintenance of skills</li> <li>• Equity of access to emergency care across Wales (not Cardiff centric)</li> <li>• Improved patient outcomes</li> <li>• Enhanced Clinical skills across NHS Wales</li> <li>• Downstream benefit for other NHS services – including recruitment and retention of critical care consultants</li> <li>• Equitable; safe; effective; efficient; person centred and timely (meeting the Welsh Government guidance on Care of the critically ill: quality statement October 2021) link <a href="https://gov.wales/care-critically-ill-quality-statement-html">https://gov.wales/care-critically-ill-quality-statement-html</a></li> </ul>
	Recommendation – supported by data and clinicians	EMRTS specialist medics and staff supportive of the change and key to see as many patients who need their service as possible

## 7. Communication approach

The aim of the approach is to keep our key stakeholders information throughout the process and to ensure that they have an opportunity to be heard.

The approach aims to be inclusive and widespread to there is genuine understanding of the reasons for the work and the issues to be addressed.

The aim of the approach is to ensure that the messages from the EASC and its supporting meetings is consistent and clear.

Phase 2	Activity	Including
Strategy and implementation	Develop communication key messaging	Once clear on process required by the CHCs and proposal received by EASC
	Proactive communication with communities 'speaking the truth, being open and honest to those who feel they could be affected'	Plan to be as open as possible and use available opportunities including videos and web based approaches Attend face to face meetings
	Proactive alternative service communications	Will consider the needs of all people and provide information in different methods
	Internal communications on key messaging, both within EASC, EMRTS and Charity	Develop an update process
	Further community engagement strategy: i.e MSs; MPs; Social Media Groups (Facebook)	Will need information for key stakeholders

## 8. Stakeholders

Need to be briefed on the work of the EASC and in relation to EMRTS including timescales and implementation plan.

First briefing sent on Friday 14 October with an overview of the current position. As yet no report received, only highlights from the reports from both EMRTS Cymru and WAAC.

## **9. Considerations at the EASC level**

- Need to ensure that EASC Members briefed appropriately
- EASC meeting to be held in public and all necessary arrangements made
- Need to work with the Chair to ensure meeting runs effectively
- Clarity re the decision-making process
- Need to meet the requirements as identified and recommended by the Community Health Councils.

## **10. Wider considerations that also impact on communications and engagement**

- Concerns re the support for the Charity, particularly in Powys and north west Wales
- Facebook pages developed to save the air bases – key public engagement opportunity

## **11. Communications implementation plan**

With timescales

Activities presentation drafted

## **12. The role of communications**

Effective communications for this work are key to the success and must be the responsibility of everyone involved in the process. Whilst communication experts will advise and support, it is important that everyone recognises their roles and responsibilities to ensure that this work is clearly defined.

The role of the communication experts in supporting the work of the Chief Ambulance Services Commissioner on behalf of EASC will underpin the work but there are limitations in terms of what can be achieved. Behavioural and system change does take time and inevitably the recommendations and subsequent implementation plan to clarify what will happen next will be the essential element in terms of the impact of the communication. All involved have a role to play in this work.

## Roles and responsibilities


Who	Name	Role	Comments
Chief Ambulance Services Commissioner	Stephen Harray	Lead for work Sign off for all key documents	
EASC Chair	Chris Turner	Independent Chair	Assurance and governance complied with
EASC Members and nominated deputies	As per health boards	Decision making body	Opportunity for discussion at health boards
National Director EMRTS	David Lockey	Lead for all clinical advice  Sign off for media relating to clinical care	Need to use time wisely and get sign off for key documents which the information can be reused from Video developed
CEO Wales Air Ambulance	Sue Barnes		Important to have sign off re the role of the WAAC and also provide clarity what they might not be able to continue
WAAC Comms	Steven Stokes		Need to be clear on the role / with advice from NHS Wales comms and service change experts
Matt Edwards	Lead coordinator	All to include Matt in any emails	Keep the story Management of key information Draft key documents and get sign off
Communication support	Lee Leyshon Sue Bailey Jo Abbot Davies Steven Stokes All Wales Comms and Service Change teams	Professional comms advice	Need to clarify what we need
EASC Committee Secretary	Gwenan Roberts	EASC Support to Matt	Ensure EASC is updated
Head of Informatics	Ricky Thomas		Any actions on advice of Comms expert








Phase 3	Activity	Including
Evaluate, thank and realign	Regular behaviour change impact assessments to continue to understand public behaviours, perceptions and decision-making processes	Need to consider early in the work Must present to EASC
	Positive 'Thank You' communications	
	Share analysis and regular changes across a range of platforms	

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## STAKEHOLDER LIST

Group	Name	Contact	Comment
Emergency Ambulance Services Committee	NHS Wales Chief Executives of health boards and NHS Trusts (and nominated deputies)	(via EASC email)	Distribution list  EASC Members only and Designated Depu
EMRTS Director and Team	David Lockey	(Via EASC email)	
Wales Air Ambulance Charity CEO	CEO Sue Barnes	(Via EASC email)	
Welsh Ambulance Services NHS Trust	Chair and CEO	(via EASC email)	
Welsh Government	Minister for Health and Social Services Eluned Morgan	(via EASC email)	
	CEO NHS Wales Judith Paget	(via EASC email)	
	Various officials as policy leads Aled Brown Sarah Jones		
Local Government	Welsh Local Government Association leader Cllr Andrew Morgan	(via EASC email)	
Community Health Councils	Board of Community Health Councils in Wales Angela Mutlow	(via EASC email)	
Staff Side Organisations	NHS Employers	NHS Employers Wales Richard Tompkins, Director	
NHS Confederation Wales	Darren Hughes	Director, Welsh NHS Confederation	

Group	Name	Contact	Comment
Members of the Senedd		 Names and emails of Members of the Senedd	 Members of the Senedd Oct 2022.msg
Members of Parliament		 List of Welsh MPs Oct 2022.docx	 Members of Parliament (Wales).msg
Organised interest groups	Save Welshpool base Facebook page		
	Save Dinas Dinlle Facebook page		
NHS Wales Head of Communications	All heads of comms		 Heads of Comms NHS Wales.msg
Town and Community Councils Powys			 Powys Town Councils.msg
Town and Community Councils Gwynedd			 Gwynedd Town Councils.msg
Media		Following discussion with Stephen HARRY	
Powys and Gwynedd council members		Waiting for response to emails	

## Service Development Proposal – EMRTS Cymru and Wales Air Ambulance Charity

### Timeline and key milestones

Stage	Activity (summary)	Timeline
<b>Initial scoping Phase 1</b>	Chronology of meetings held developed	ongoing
	Initial Engagement meetings EMRTS and Charity with their staff	June 2022
	Charity meeting with Trustees	June 2022
	Informal discussion with EASC Team (EMRTS/Charity)	June 2022
	Discussions with staff EMRTS and Charity	June 2022/ongoing
	Visit to Dafen by Minister (EMRTS/Charity)	5 August 2022
	Correspondence with MSs (various) (EMRTS/Charity)	August
	Charity correspondence with CHCs	August
	Briefing for MSs online	22 August 2022
	Briefing All Wales CHC (EMRTS/Charity)	31 August 2022
	Briefing Powys THB (EMRTS and Charity)	1 Sept 2022
	Overview presentation at the Emergency Ambulance Services Committee	6 Sept 2022
	Briefing CASC, WG official EMRTS and Charity	9 Sept 2022
	Briefing Powys County Council Cabinet Planning committee (EMRTS & CASC)	15 Sept 2022 20 Sept 2022
	Briefing Farmers Union of Wales (EMRTS/Charity)	26 Sept 2022
	Briefing National Farmers Union (EMRTS/Charity)	28 Sept 2022
	CASC Initial discussion with the office of all Wales Community Health Councils	
	Submission of the Service Change Pro Forma to the All Wales CHCs	4 October 2022
	Draft presentation used at the Emergency Ambulance Services Committee to the EASC Management Group	20 October 2022
	Presentation to the CHC Joint Services Planning and Change Committee – present the proforma	20 October 2022
<b>Phase 2</b>	Clarify process required	CHCs have confirmed
	Communications / engagement /consultation activity	Robust, open, inclusive and transparent engagement process
	Compile Responses	Prior to EASC meeting






<b>Service Development proposal</b>	Draft Service Development proposal produced and presented to the EMRTS Delivery Assurance Group	1 November
	Draft Service Development proposal produced and presented to the Emergency Ambulance Services Committee	8 November
	Checkpoint meeting progress with engagement With the Emergency Ambulance Services Committee	6 December
<b>Phase 3 Decision</b>	Presentation of progress on the Service Development proposal to the EASC Management Group	15 December
	Final Service Development proposal produced and presented to the Emergency Ambulance Services Committee for approval	Potential dates 17 January 2023 Or March 2023

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## SWOT ANALYSIS

Strengths	Weaknesses
<ul style="list-style-type: none"> <li>• Amazing service, on development trajectory particularly since 2012</li> <li>• Led and managed by highly skilled clinicians – the driving force for the development of the service</li> <li>• Well trained clinicians</li> <li>• Positive independent service evaluation</li> <li>• Slow and deliberate internal process of development corroborated by external independent expert (Optima)</li> <li>• Of interest to specialist clinical staff (12 additional consultants in Wales related to opportunity to work with EMRTS)</li> <li>• Meets 72% of the demand</li> </ul>	<ul style="list-style-type: none"> <li>• Generally people don't understand how the service is provided</li> <li>• Limited 24 hour cover</li> <li>• Not able to fly during the hours of darkness</li> <li>• One-way communication – difficult to respond to social media posts</li> <li>• Unable to work with key stakeholders in advance of the presentation of the comprehensive case</li> <li>• Role of EMRTS and WAST not understood</li> <li>• Lack of public understanding of the down time of the current service and its cost</li> <li>• Missed opportunities for missions for staff to upkeep skills</li> <li>• With change could meet 88% demand</li> </ul>
Opportunities	Threats
<ul style="list-style-type: none"> <li>• To save more lives</li> <li>• Improve the outcome for critically ill or injured patients</li> <li>• Additional hours of service (extra 6 hours per day) at no additional cost</li> <li>• Practitioners able to better use their skills</li> <li>• Service utilised as fully as possible</li> <li>• Provide an all Wales service move from 72% to 88% (world class service)</li> <li>• To provide a comprehensive case for change</li> </ul>	<ul style="list-style-type: none"> <li>• Staff loss as unable to move to work in new site</li> <li>• Change matter and unsettling for staff and communities</li> <li>• Communities not supporting the Wales Air Ambulance Charity</li> <li>• Lack of clarity for the metrics of success</li> <li>• Base in the community more important than opportunity to treat more patients</li> <li>• Negative publicity is more important than saving more lives</li> <li>• Public aware that underutilisation is an unnecessary cost pressure (particularly for the Charity)</li> <li>• Political interests – local is best</li> </ul>

## Key Documents

	Document	
1.	Equality Impact Assessment Sent to CHC 4 October 2022	 Equality Impact Assessment - EMRTS
2.	Draft EASC Service Change pro forma submitted on 4 October to All Wales CHC (Angela Mutlow)	 DRAFT EASC Service Change Pro Forma Cf
3.	Overview presentation made at EASC 6 September 2022	 EASC focus 2022 Final.pdf
4.	Activity presentation used by Chief Ambulance Services Commissioner	 Service Development Proposal 141022 Vers   Service Development Proposal 141022 Vers
5.	Dedicated page on EASC website including <ul style="list-style-type: none"> <li>• Frequently asked questions</li> <li>• Briefing note</li> <li>• Online contact / feedback form</li> <li>• Supporting documentation</li> </ul> <a href="https://easc.nhs.wales/commissioning/emrts/sdp/">https://easc.nhs.wales/commissioning/emrts/sdp/</a>	
6.	Service Development proposal	EASC 8 November

## Communication Channels

Tool	Action	CHC	HBs	Protest Groups	WG	
Website	Available from 14 October					
Email	First email sent 14 October					
Social media	EASC does not have a site/page To discuss with HBs					
Posters and leaflets	To be confirmed					
Partner communications	Working closely with WAAC					
Team or Zoom event – informal Q&A External internal	Potential to utilise for community groups etc For further discussion					
Staff briefings	EMRTS Cymru and WAAC are responsible					
Intranet	EMRTS Cymru and WAAC are responsible Not relevant for EASC Team					
Surveys Questionnaires	Potentially could develop					
eform for questions	Completed on website					
Q&A updated and accessible on website	Ongoing - started 14 October 2022					
Focus Groups	To be considered					
Health Boards	Communication and engagement approaches with population in line with legislative requirements					

## Key stakeholders Grid






<p>High power – low interest (keep satisfied) – inform and engage regular interaction and direct communication</p>	<p>High Power – High interest (high priority stakeholders) Regular interaction / specific details and direct or bespoke communications</p>
<p>Welsh Government - Minister Eluned Morgan - Officials Judith Paget; Nick Wood; Aled Brown; Sarah Jones Health Boards Local Government – Welsh Local Government Association leader – Cllr Andrew Morgan</p>	<p>All Wales Community Health Councils (CHC), particularly Powys and North Wales Board of CHCs - Angela Mutlow and Alyson Thomas EMRTS National Director – Prof David Lockey WAAC Chief Executive – Sue Barnes WAAC Trustees and senior management team EMRTS Senior management team First Minister / Minister for Health and Social Services Local councillors – particularly Powys Cllr Joy Jones Russell George Craig Williams Mabon ap Gwynfor Carol Shillabeer Protest Groups EMRTS and WAAC Staff Communities where base affected Members of the Senedd Members of Parliament Steve Stokes – Director of Comms WAAC Heads of Communication and Engagement HBs</p>
<p>Low power – low interest (minimal effort) Generic information one way, limited engagement</p>	<p>Low Power – High interest (keep informed) Inform and involve as needed, generic information</p>
<p>Public across Wales NHS Trusts WG Commissioners in Wales</p>	<p>Public across Wales – particularly where bases affected – Welshpool and Caernarfon Welsh Media outlets Royal Colleges – especially of Emergency Medicine NHS Confederation in Wales Town and Community Councils</p>









**EMRTS Service Development Proposal - Stakeholder heat map**

Name	Level	Oct				Nov				Dec				Jan				Feb				Mar					
		10	17	24	31	7	14	21	28	5	12	19	26	2	9	16	23	30	6	13	20	27	6	13	20	27	3
Community Health Councils	1	Red	Red	Yellow	Yellow																						
Angela Mutlow	1	Red	Red	Yellow	Yellow																						
Alyson Thomas	1	Red	Red	Yellow	Yellow																						
First Minister	1	Yellow	Yellow	Yellow	Yellow																						
Minister for Health and Social Services	1	Yellow	Yellow	Yellow	Yellow																						
Russell George	1	Red	Red	Red	Red																						
Craig Williams	1	Red	Red	Red	Red																						
Carol Shillabeer / Jo Whitehead	1	Red	Red	Red	Red																						
Save Welshpool Facebook page	1	Red	Red	Red	Red																						
Save Caernarfon Facebook page	1	Red	Red	Red	Red																						
Mabon ap Gwynfor	1	Red	Red	Red	Red																						
Rhun Ap Iorwerth	1	Red	Red	Red	Red																						
Cllr Joy Jones	1	Red	Red	Red	Red																						
Ben Lake	1	Red	Red	Red	Red																						
Members of EASC	1	Blue	Blue	Yellow	Yellow																						
Prof David Lockey	1	Green	Green	Green	Green																						
Sue Barnes	1	Green	Green	Green	Green																						
EMRTS Management	1	Green	Green	Green	Green																						
EMRTS Staff	2	Blue	Blue	Blue	Blue																						
WAAC Trustees	1	Green	Green	Green	Green																						
WAAC Staff	2	Blue	Blue	Blue	Blue																						
Judith Paget	1	Blue	Blue	Blue	Blue																						
Nick Wood	2	Blue	Blue	Blue	Blue																						
WG Officials Aled Brown/Sarah Jones	2	Blue	Blue	Blue	Blue																						
WLGA leader Cllr Andrew Morgan	2	Blue	Blue	Blue	Blue																						
NHS Trusts	2	Blue	Blue	Blue	Blue																						
Heads of Engagement and Comms NHS	2	Blue	Blue	Blue	Blue																						
Public – Wales wide	1	Blue	Blue	Blue	Blue																						
Public - Powys	1	Blue	Red	Red	Red																						
Public - Gwynedd	1	Blue	Red	Red	Red																						
Royal Colleges	2	Blue	Blue	Blue	Blue																						
NHS Confederation	2	Blue	Blue	Blue	Blue																						
NHS Wales Heads of Communication	2	Blue	Blue	Yellow	Yellow																						
Powys Town and Community Councils	2	Red	Red	Red	Red																						
Gwynedd Town and Community Councils	2	Red	Red	Red	Red																						
Local Authority Councillors	2	Red	Red	Red	Red																						

## Activities Record as at 28 October 2022

Organisation/Committee /Group/Department	Attendance	Date and Time	Information provided or presented	Key discussion points	Formal record or notes?
EMRTS to CASC	Stephen Harray & EASC TEam EMRTS – MW, DL, DR Charity - SStokes	24 June 2022	Nothing shared  Snapshot taken of some slides:  Strategy slides.docx	Overview provided: <ul style="list-style-type: none"> <li>• Getting to the end of the analysis</li> <li>• Close to speaking with staff</li> <li>• Rare opportunity to address strategic opportunities – build on five year evaluation and 24/7 evaluation, aviation contract</li> <li>• Address under-utilisation of resources</li> <li>• Increase number of incidents attended and</li> <li>• Maintain clinical staffing levels</li> <li>• Meet 88% predicted demand</li> <li>• 4<sup>th</sup> aircraft - resilience across system</li> <li>• Robust rigour of analysis</li> <li>• Very positive headlines both for patients and workforce</li> <li>• Reduce level of variation across sites</li> </ul>	-
EASC Committee MS Teams	DL, MW, DR, Sue Barnes, Steve Stokes (M Slattery)	6 Sept 2022	 2.3 EMRTS presentation for foc	See formal note	 Draft note EMRTS Focus on section of
WG officials. MS Teams	Aled Brown, Leigh Davies, Caroline Lewis, Megan Owen Stephen, Mark Winter, David Lockey, Sue Barnes. SMH and ME	9 Sept 2022	 EMRTS WAA roadshow Data v2.p	Are we reaching as many patients as possible? Is the geographic position of our bases and our service delivery model allowing us to be the most effective service for Wales? We can significantly improve our response/treat more patients within existing resources (significant increase to 88% of demand). Data-a significant part of the d-making process- shows affects all regions positively CHC decision re the process to be followed. A national decision. Robust nature of the data analysis/ demand and capacity work noted, other services could take note Importance of keeping in contact, coordinated approach	-
EMRTS DAG	Stephen Harray & EASC Team	12 Sept 2022	 EMRTS DAG Agenda 12-09-2022.  No minutes as yet	See minutes	Insert minutes when available

Organisation/Committee /Group/Department	Attendance	Date and Time	Information provided or presented	Key discussion points	Formal record or notes?
Powys CHC, Service Planning Committee. MS Teams	CHC members Stephen Harray, EASC Team	20 Sept 2022 3.20-3.50 (15 mins presentation, 15 mins questions)	 EASC_Powys CHC 20 September 2022	<ul style="list-style-type: none"> <li>• Differences between EMRTS and WAST</li> <li>• Improve utilisation, reduce downtime</li> <li>• No decision made-process to be followed</li> <li>• Road v air response</li> <li>• EMRTS critical care hub – triage, skilled clinicians deciding which individuals receive the treatment</li> <li>• Mid Wales people see empty area with no helicopter</li> <li>• Post code lottery</li> <li>• Important where to site RRVs</li> <li>• Political hot potato</li> <li>• Misinformation out there</li> <li>• Make available the facts, listen to views and concerns, reflect in decision-making process</li> <li>• Offer of collective briefing to all members of the senedd</li> <li>• National service</li> <li>• ED at scene, take direct to definitive care, increased survival rates</li> <li>• Work with all-Wales CHC</li> <li>• Social media campaign noted</li> <li>• Opportunity discussed at EASC 6 Sept, proposal to EASC 8 Nov</li> </ul>	-
Service Analysis Presentation to Powys Councillors County Hall, Llandrindod Wells	Stephen Harray, EASC Team, Sue Barnes, Dave Lockey, Dave Gilbert, Mark Winter, Dave Rawlinson, Steve Stokes	23 Sept 1130-1300	 Powys County Council 23.09.22 V5   WAA-EMRTS Service Improvement Briefin		-
South Glamorgan CHC, Service Planning Committee. MS Teams	Stephen Harray & EASC Team	13 Oct	 Service Development Proposal 121022 Ver:	<p>Key points:</p> <ul style="list-style-type: none"> <li>• Assurance re Charity's financial position against the increased air ambulance cost, check financial probity as part of assurance process. Discussions already held, reserves of 12 months in place</li> <li>• Is it a cost saving exercise?</li> <li>• Does it require loss of existing bases? Explained that we will look at the proposal once it is received and will look to ensure the maximum number of patients receive this service. Have to consider proposal in context of national service, take all factors in to account</li> <li>• Need to understand the passionate views of the population re local bases</li> <li>• How soon will changes take place? 12-36 indicative timescale given</li> <li>• What is the service model in times of extreme weather – air and road explained, optimise use of road networks</li> <li>• Take in to account night flying and flight paths</li> <li>• Why not 24 hrs in NW base? – activity beyond 2am very low</li> <li>• Service still requires a 999 call – felt that no difference in how people access the service, service is still available and no change to where the patient received their further care – therefore not felt to be a service change</li> </ul>	

Organisation/Committee /Group/Department	Attendance	Date and Time	Information provided or presented	Key discussion points	Formal record or notes?
Dafydd Evans BBC	Stephen Harrhy	14 Oct	Telephone conversation	Spoke about a proposal to EASC on 8 Nov incl: <ul style="list-style-type: none"> <li>• Opportunity to put data in the public domain</li> <li>• Getting a sense of the questions the public want answered</li> <li>• The more comprehensive we can make the better</li> <li>• EMRTS timeline - developments</li> </ul>	
Angela Mutlow	Stephen Harrhy	17/10	Telephone conversation	Re	
North Wales CHC, Full Council In person	Stephen Harrhy Sue Barnes - Charity	18/10/2022 am	<b>Standard presentation:</b>  Service Development Proposal 141022 Ver: <b>CHC Papers:</b>  NWCHC FC Agenda and Papers 1810202		
CHC – JSPCC MS Teams	Stephen Harrhy	20 Oct			
Powys and BCUHB Comms Leads Catch-up MS Teams	EASC Team, Powys, Betsi Cadwaladr HBs	24 Oct			
Ruairi Walsh, County Times	Stephen Harrhy	26 Oct	Telephone conversation	Conversation re wording around public engagement process for article in line with email sent	
Extraordinary EMRTS DAG MS Teams	Stephen Harrhy	1 Nov			
EAS Joint Committee meeting	Stephen Harrhy, EASC Team	8 Nov			
Comms Leads Catch-up MS Teams	EASC Team, Powys, Betsi Cadwaladr HBs	9 Nov			
All Wales Engagement / Service Change Leads MS Teams	Stephen Harrhy	11 Nov			
Comms Leads Catch-up MS Teams	EASC Team, Powys, Betsi Cadwaladr HBs	23 Nov			
Comms Leads Catch-up MS Teams	EASC Team, Powys, Betsi Cadwaladr HBs	7 Dec			