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## Out of Office

CASE STUDY ONE:
NATIONAL AMBULANCE
DISABILITY NETWORK













# CASE STUDY ONE: NATIONAL AMBULANCE DISABILITY NETWORK

## Context

14 NHS Ambulance Trusts provide emergency medical and urgent response and care across the UK. Ambulance Trusts have three distinct workforces with unique needs: frontline operational staff, control room staff, and corporate staff. Every Ambulance Trust in the UK has its own Disability network and there is a National Ambulance Disability Network, which is a network of network chairs, driving strategy to improve experiences of disabled employees.

This content has been created with Dawn Poulson Whelan, Chair of the National Ambulance Disability Network and East of England Ambulance Service NHS Trust, and Pauline Hogarth, Deputy Chair of the National Ambulance Network and North East Ambulance Service NHS Trust.

## Challenges

Each staff group in the Ambulance Service experiences different barriers to engagement and requires different types of support to accommodate their work environments and schedules.

- Frontline Operational Staff face the biggest challenge in engaging with the network due to their shift work, night work, physically remote postings, variable Wi-Fi in remote locations, and limited access to corporate facilities.
- Control Room Staff and Corporate Staff also have engagement challenges, including shift work and the unpredictable and high-pressure nature of their roles.
- Access to technology and resources: staff won't necessarily have a work-provided mobile phone and may not want to access work communication on/with their own personal devices.
- Tracking engagement with the networks is challenging, because there is no standard system for doing that; currently engagement is tracked or known 'intuitively' by individual networks. The national goal is to develop a standard method to understand engagement across different trusts.

- Variability among Trusts: each trust operates independently in terms of their activities and how they manage their networks. While there is a standard structure for networks, the implementation of activities varies.
- In person meetings: regular, in-person meetings at HQs don't always work for such a distributed workforce; geography and logistics make it impossible for network members to engage and they can generate disengagement, because people feel disenfranchised.

## Solutions

Identifying the challenges that staff experience, both with network engagement and related to disability, happens through the sharing of lived experiences, regular meetings with network chairs, and anecdotal discussions. Engagement issues are often confirmed by multiple trusts, indicating common challenges across the sector.

**Establishing the National Ambulance Disability Network** has created a forum that coordinates activities, and shares resources and guidance. The forum fosters a sense of community, allowing for proactive and supportive responses to issues raised by staff in individual trusts. It also provides mentoring and leadership development support to network Leads, to enable them in their network leadership. **Engaging with** the Ambulance Service's functions for HR, organizational development, learning, and training has secured support and engagement. Having buy-in from senior leaders, such as Chief Executives and Chairs, has significantly increased the frontline impact the networks can have. Communications Directors have also supported the large disability campaigns, like Disability History Month and Disability Pride Month.

Using existing and multiple communication strategies. Operational staff have tablets for work, so the networks use content that can be accessed in that format: short videos, podcasts, storytelling campaigns which can also be accessed on internal intranet sites. QR codes proved successful in capturing the attention of operational staff, providing a quick and engaging way to access information. Staff members, including those with disabilities, have found content useful in their roles, even using them to improve their patient interactions.

Don't forget the power of word of mouth. Some staff won't have the time or equipment to access central platforms or guidance; make it easy for them to reach out person to person, through a central email address or phone number. This also enables the network to keep in touch with the real issues members are facing.

#### Dyslexia Smart

North East Ambulance Service were the first NHS Trust in the UK to receive the Dyslexia Smart Award from the British Dyslexia Association in 2021 and to have accredited workplace needs assessments for dyslexia. This began with two colleagues who shared their lived experience of working with dyslexia at a network meeting, from which a dyslexia working group was formed. Since then, the East of England Ambulance Service have attained Bronze and Silver Quality Marks from the British Dyslexia Association.



## Role modelling and storytelling

Engaging executives and senior leaders in sharing their stories provides powerful role models for staff. It demonstrates that individuals with disabilities can achieve high-level positions and that their contributions are valued. Written and videoed leaders' stories have been shared nationally, which have directly resulted in increases in network membership.

## Employee and patient support

Disability-related guidance provided to staff has been extended to patient care. For example, guidance for interacting with assistance dogs was developed, which operational staff then used to inform their service user engagement. This approach has been applied to other disabilities, such as neurodivergent conditions and sign language, enhancing overall support for diverse needs both amongst staff and service users.

Integrating disability into organisational life: everyone in the organisation has responsibility for disability inclusion and accessibility; this should not be siloed into a disability network. The network can share lived experience and solutions, but sponsorship from leaders and support from local, regional and national teams (e.g. HR) are vital.

Make campaigns interactive: to reach staff who are not able to engage in 'real time' activities, they have used interactive campaigns where staff can make a pledge online or submit a short video of themselves into a video collection, anytime from anywhere.

**Keep the human connection:** provide safe, confidential space for members to share their challenges, needs and experiences amongst a supportive community.

Design events and campaigns with accessibility in mind: they have used online lunch & learn sessions, that people can drop into during their shift, and which are also recorded for people to play back at another time. The events have an open Q&A forum, so if someone is watching a recording during a nightshift, they can still ask a question and have it answered.

## Best practices

"By engaging with the national group of Communications Directors, we were able to get key disability events marked on local and national celebrations calendars; having communications from a national level opens up a wider audience."

Dawn Poulson Whelan, Chair of the National Ambulance Disability Network

# Your Top Tip "Start small; get it right for the staff,

"Start small; get it right for the staff, whatever that looks like. That will build the reputation of the network. Don't get busy and consumed by a too ambitious plan."

Pauline Hogarth

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