

Demand for acute care rises every winter: To reduce this demand we need to intervene at multiple points:

Preventing illness and improving care in primary and community settings ▶

Improving the flow of patients through the hospital ▶

Ensuring the timely discharge of patients who no longer require acute care

The winter plan has 24 initiatives across 8 key areas:

Preventing admissions and timely discharges



Reducing acute pressure



Maintaining Delivery



- 1. Using telehealth to support access to primary care for rural Māori, and Pacific general practices
- 2. Clinical telehealth to support ambulance services by providing general practice or specialist medical advice to crews*

Primary and Community Settings

after-hours and as overflow*

- 3. Prototyping remote patient monitoring to support rural Māori communities*
- 4. Enabling pharmacies to treat minor ailments for tamariki under 14, immediate whānau, and Community Service Card holders*
- 5. Providing community radiology services for acute conditions via the private sector*
- 6. Comprehensive Primary Care Teams will combine traditional primary care services with kaiāwhina, physiotherapists, pharmacists, care coordinators, and paramedics*
- 7. Expanding access to Primary Options for Acute
- 8. Making Accident & Urgent Care Clinics more accessible*

- 9. Initiatives to support Aged Residential Care (ARC) to care for patients and help prevent hospitalisation in select regions*
- 10. Enable needs assessments for ARC to occur in other settings so as not to delay patient discharge and increase hospital capacity in select regions, with initial focus on Auckland*
- 11. Community Rapid Response Services will use allied health staff to support people with complex needs at home, preventing hospital admission or facilitating early discharge*
- 12. Hospital in the Home to prevent hospital admissions and speed up discharge by providing hospital-level care to people at home, with appropriate support

- 13. The Rapid National Data Automation Project provides daily patient-level data to give more timely and detailed information for monitoring and responding to pressures. This data informs national and regional escalation models
- 14. Regional and national escalation pathways and targeted improvement work to support better hospital flow. The National Flow Improvement Programme is supporting 8 x hospitals to run internal diagnostic processes to identify bottlenecks and develop action plans to drive flow improvement*
- 15. Supporting people with mental health needs to reduce the number of people that present to, and stay in, ED for example Counties Manukau are launching a Co-Response Team with NZ police and local mental health assessment teams*



- All mitigating actions are exhausted before planned care deferrals are considered
- Deferrals are time limited and communicated to patients as far in advance as possible
- To prevent the need for deferral, new approaches to service and resource configuration are piloted (eg 'cold sites' where only elective work is done, reserved theatres)

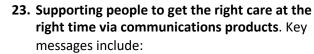
Workforce

Canterbury.

Immunisation

- 18. Increasing uptake of influenza vaccination, especially among Māori and Pacific people.
- 19. Promoting concomitant childhood vaccination to reduce the impact of disease by encouraging whānau

Communications and behaviour change



- To get immunisations up to date: flu, COVID-19 vaccinations & childhood immunisations
- Keep up healthy habits that worked so well to stop the spread of COVID-19
- Steps to take to when you feel unwell stay home if sick & RAT test and isolate if it's COVID-19
- Care options available in the community, before you go to a GP or ED (self care, virtual consults)
- Working on a longer-term programme to understand what drives people to make certain healthcare choices, and how we can support people to seek services that better meet their needs.



COVID-19



- 24. Ongoing COVID-19 response activities remain in place, continue to have highly effective COVID19 measures such as:
- · Free provision of masks
- Free provision of RATs
- · Antivirals are widely available
- Overall estimates suggest a 40-60% reduction in mortality risk for oral antiviral treated patients in New Zealand aged 65 years and over (for the period 1 January 2022 to March 2023)

- 17. Increasing uptake of COVID-19 boosters to prevent severe illness and hospitalisation.

21. Expanding Earn and Learn for Health Care Assistants (HCAs) to reduce staffing pressures. HCAs assist nurses in care delivery. Earn and learn programmes for HCAs are in Waitemata, Auckland, Counties, Waikato, Tairāwhiti, and

list', and the NZREx bridging programme.

20. International recruitment to grow the clinical

International Recruitment Centre, an

workforce continues. Initiatives include the

international recruitment campaign, adding

certain professions to the immigration 'green

22. Influenza vaccinations will be fully funded for Te Whatu Ora staff, and health staff outside of Te Whatu Ora (e.g. community providers) will be eligible for reimbursement.