

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:

Primary and Community Settings

1. **Using telehealth** to support access to primary care for rural Māori, and Pacific general practices after-hours and as overflow*
2. **Clinical telehealth to support ambulance services** by providing general practice or specialist medical advice to crews*
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 Care*
8. Making **Accident & Urgent Care Clinics** more accessible*

Preventing admissions and timely discharges

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

Reducing acute pressure

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***

Maintaining Delivery

16. **Maintaining planned care delivery** by ensuring:
 - 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)

Immunisation

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

Workforce

20. **International recruitment to grow the clinical workforce** continues. Initiatives include the International Recruitment Centre, an international recruitment campaign, adding certain professions to the immigration 'green list', and the NZREx bridging programme.
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 Canterbury.
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.

Communications and behaviour change

23. **Supporting people to get the right care at the right time via communications products.** Key messages include:
 - 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)