



Hywel Dda University Health Board Winter Plan 2022/23







Expectations from Welsh Government

- It intended that this is the final year where a separate winter plan is developed and that in the future the detail of planning for winter will be contained within IMTPs
- The request for Winter Plans this year recognises that we are still transitioning out of the pandemic and that our health and care systems remains stretched.
- It is not intended that this is a new piece of planning work, rather that it is an opportunity to share the most up to date iteration of plans which have been developing, particularly for vaccination and urgent and emergency care, over the last few months.
- The format of each organisation's Plan will be for each Board to decide; however, Plans will need to provide the detail to feed into the National Winter Plan, particularly with respect to:
 - Population Health (Vaccinations)
 - o 6 Goals of Urgent and Emergency Care





Structure of National Winter Plan (from WG)

- 1. Introduction To be completed by WG policy leads
- Purpose of winter planning.
- Alignment to national programme
- Outcomes from winter planning
- 2. Population Health
- Preparation for coming months WG Chief Scientific Officer paper on what to expect
- Vaccination Programme Team WG & NHS Wales
- 3. 6 Goals for Urgent & Emergency Care
- Expectations of enhanced actions National Goal SRO's
- Response from NHS Wales organisations & RPB's Directors of Planning
- 4. Governance Director of Operations NHS Wales
- Expected approval process in organisations
- Role of regional partnership boards
- Publication of plan
- 5. Appendix
- Information to support decision making





Timelines for Welsh Government

- Informal request received 8th August
- Board approved Winter Plan September 2022 board
- Final submission to Director of Planning Delivery Unit End of September
- Scrutiny sessions of plans will form part of October 2022 IQPD for organisations There will be no separate winter sessions unless there are significant concerns.
- Update to Quality and Delivery Board in WG and then EDT in WG October 2022
- Launch of Winter plans (to be clarified what this is) End of October 2022





Structure of Hywel Dda Plan

- 1. Executive Summary and key messages
- 2. What is our starting position? What are our key outcomes?
- 3. How we operate as a Health Board and as a region
- 4. How are we ensuring our approach to population health
 - Responding to WG Chief Scientific Officer paper on what to expect (still awaited)
 - Vaccinations
 - COVID
 - Flu
 - Testing
- 5. 6 Goals for Urgent and Emergency Care (see next slide)
 - Financial and workforce considerations
 - Risks and Challenges





6 Goals for Urgent and Emergency Care

Goal	Winter priorities
1 Coordination, planning and support	Health Boards to increase profile and distribution to vulnerable groups of 'My Winter Health Plan' document
for people at greater risk of needing	Health Boards to utilise the Pan Cluster Planning Group arrangements to coordinate and plan with partners
urgent care	Health Boards to optimise use of:
	1) Emergency Department Wellbeing and Home Safe service (delivered by British Red Cross); and
	2) Hospital to a Healthier Home service (delivered by Care and Repair)
2 Signposting people with urgent care	Health Boards to accelerate plans to deliver NHS 111 Wales MH 'press 2' pathway
needs to the right place, first time	Accelerate plans for NHS 111 Wales urgent dental pathways with support from Chief Dental Officer /LHB Clinical Leads
	Resilient NHS 111 Wales / UPC OOH services
	Incorporate Primary & Community escalation as part of the wider whole system escalation mechanisms
3 Clinically safe alternatives to	Robust triangulation of clinical care and handover between GMS / 111 / UPC OOH services
admission	Use of the Urgent Primary Care Centres and evaluation to inform Health Board planning
	Health Board implementation of the Community Nursing Specification
	The Delivery Unit report published in April 2022 on step up Intermediate Care sets out clearly the projected number of intermediate care visits / teams
	that would be needed based upon figures that had been supplied and modelled. Health Boards and Local Authorities should have a clear plan in response
	to this work
	Seven day same day emergency care services throughout winter period
4 Rapid response in crisis	Health Boards to optimise use of Mental Health crisis response transport pilot (delivered by St. John)
	Continued expansion of remote clinical support services through the consolidation and expansion of the use of 'ECNS' and 'PTAS' Models, to ensure that
	patients awaiting an emergency ambulance response are clinically assessed within 20 minutes of their call.
	Enhanced delivery of EASC improvement plan actions (WAST)
	Enhanced delivery of ambulance patient handover improvement plan actions (Health Boards)
5 Optimal hospital care and discharge	To embed v1 of the optimal patients flow framework at ward and hospital level and commence national reporting against agreed measures (the
practice from the point of admission	measures will be determined as part of the expert group work over the next 3 months)
	Consistent delivery of new repatriation policy following publication in January 2023
6 Home first approach and reduce risk	Consistent reporting of Delayed Transfers of Care
of readmission	Increased compliance with D2RA Pathways
	Current Interim Placements reviewed and Step Down to Recover Rehabilitation Implemented to support better outcomes for the person
	Step Down to Recover Community Bedded Facilities developed and operationalised. Workforce key roles recruitment campaign and options delivered