

Learning from previous years

There is a greater focus on capacity and forecasting in this year's

The format of the winter plan has been simplified

We are working to create a joint SWASFT and NHSE/I 'Winter Room' which will be new for this year

We are creating a '24/7 Winter Manager Cell' based in Exeter to support resilience and performance during the winter period

We have moved to a 'stand down' rather than 'stand up' concept for developing rota's and people volunteering help from other directorates

We have increased our engagement with Acute Trusts, NHS 111 and CCGs to share winter plans

Strategic Planning

We are implementing 'Our People Plan' and have introduced an additional 63 new ambulances into the fleet

We have reduced training, annual leave and meeting attendance over the Christmas and New Year period

We will robustly manage handover delays with a system-wide objective to:

- 1. Having a zero tolerance approach to holding patients in ambulances once we arrive at the emergency departments. If this happens crews are asked to submit a Datix
- 2. A system target of a minimum 50% reduction in one hour+
- 3. Enable a reduction in handovers over 15 minutes, with a target to reduce the average time to handover by half compared to 2018/19 actual levels

We are aiming to approach 95% of all front line staff to offer the Influenza vaccine with a national target of 80% receiving the vaccination

The 'SWASFT 5'

As in previous years there will be a strong focus on the 'SWASFT 5', which are:

- Operations
- The 999 Clinical Hub
- ROC IM&T

The SWASFT 5 have been identified as critical to operational delivery of a safe service

Other directorates have offered more support to Operations this year and we are working with them to work up specific roles and rotas

Key Planning Assumptions

Enhanced end of shift protection for crews has gone in from 16 September 2019

We know from experience that demand during the winter months is between 2% and 6% higher than the other seven months of the year with spikes in activity on key dates

We are currently forecasting and planning on an increase in incident volumes of 9.7% compared to last year during the **Christmas and New Year period**

We have put plans together based on a set of assumptions. There will be unplanned surges in activity and events that cannot be predicted which is why we are focussing on resilience and having a robust command structure in place

The winter plan covers the period from 1 November 2019 to 31 March 2020

The Christmas and New Year period is 16 December 2019 to 5 January 2020. Easter 2020 falls early next year on 10 - 13 April and therefore this plan will be extended to cover this period

We have five key objectives

To safeguard our people's welfare at all times

To enable the Trust to continue to deliver services in line with commissioned performance standards

To continue to be able to provide a confident, safe and fective response to any significant and major incident during the winter period

To maintain the reputation and confidence of the Trust amongst key stakeholders including the Trust Board, our people, our patients, our health partners in primary, community and acute care and our commissioners

To provide assurance that the Trust is as prepared for winter as possible

External Support

We have a range of people and groups supporting us

- **4,773 Community First Responders**
- 28 Active BASICS Doctors
- **639 Fire Co-responder Sites**

We are working with St John to provide us with support this year based on their fantastic response last year

We will be using Mobile Treatment Centres and Alcohol Recovery Centres where they are available to us locally

Peak days and resourcing forecast

Activity is forecasted to peak on the following five days:	
Peak Days	Incidents
14 December 2019	3,086
21 December 2019	3,106
22 December 2019	3,088
26 December 2019	3,083
01 January 2020	3,524

Accountability and Command & Control

Overall accountability for winter planning and preparedness rests with the Executive Director of Operations supported by the **Head of EPRR**

We will have 24/7 command and control cover for the winter

There is an on-duty Tactical Commander within the Clinical Hub

We are working to create a joint SWASFT and NHSE/I 'Winter Room' which will be new for this year with a view to reducing duplication of effort and making sure we report consistently within the system

There are other directorates who are also on call over the winter period including the Clinical Directorate, IMT and Communications

Key Milestones

We have held monthly Winter and Escalation Steering Group meetings since June

We are undertaking a review of the Trust Escalation Plan with a focus on the action cards at different REAP levels

A Senior Leadership Team workshop was held in August to help shape the plan

A system-wide table top exercise was held in September with **NHSE/I and Commissioner contributions**

The final winter plan will be approved in October by the Directors Group and there will be briefings from October for the **Board, Commanders and Heads of Department**