

BRIEFING	TO:	Health and Wellbeing Board
	DATE:	26 th November 2025
	LEAD OFFICER	Steph Watt, Portfolio Lead Urgent and Community Care
	TITLE:	Rotherham Winter Plan
Background		
1.1	<p>It is an NHS England requirement to produce an annual Winter Plan in to prepare for and manage higher levels of demand and acuity for health and care urgent and emergency services associated with seasonal pressures. The plan has been co-ordinated by the ICB and developed with Place partners including The Rotherham Foundation Trust (TRFT), Rotherham Council, Rotherham Doncaster and South Humber NHS Foundation Trust, Primary Care, The GP Federation and Voluntary Action Rotherham.</p> <p>Assurance stress tests of the plan have been held regionally and locally. Rotherham’s Plan has been assured through the Urgent and Emergency Care Group and signed off by both the Rotherham Place Board and TRFT Board. The Plan forms part of a wider South Yorkshire plan which has been signed off by the ICB Board and submitted to NHS England.</p> <p>The Plan is aligned to the national urgent and emergency care metrics which are monitored through the NHSE regional team and nationally.</p>	
Key Issues		
2.1	<p>Rotherham’s demographic and associated health inequalities alongside an aging population is resulting in increased demand for health and care services, including urgent and emergency care.</p> <p>Significant time and resource have been invested in developing out of hospital services to support more people to be cared for at home, which is better for the individual and reduces avoidable conveyances and admissions.</p> <p>Where possible successful schemes developed for previous winters have been incorporated into business as usual, as higher levels of demand throughout the year have become the new normal.</p> <p>Despite these efforts we have seen record levels of demand in presentations to the Emergency Department. This results in increased waiting times for people with the associated risks and pressure on acute beds and discharge pathways.</p> <p>There appears to be vaccination fatigue within the population, therefore there is a drive to increase uptake for eligible vulnerable groups and health and care staff.</p> <p>The plan has included planning for industrial action based on learning from previous action.</p>	
Key Actions and Relevant Timelines		
	<p>For planning purposes winter is deemed to be the period between November to March. There is a pre-winter period from September when children return to school and respiratory cases start to rise. The impact of flu varies, cases usually rise in December and peak in January / February. Last year there was a long tail into March, impacting into April. This year flu has come early and is already impacting. As a result, our Acute Respiratory Infection Hub has been bought forward and the majority of our schemes are</p>	

	<p>operational. Staffing rotas are carefully planned to minimise the impact of school holidays and the winter holiday period.</p> <p>Additional funding has been provided from the Better Care Fund and Section 75 monies and TRFT and the Council have also invested to improve flow.</p> <p>Initiatives include:</p> <ul style="list-style-type: none"> i. Prevention including new ways of working in TRFT and the Council's redesign of services supporting flow. Funding for an Acute Respiratory Infection Hub for primary care, additional GP appointments and improved access. Expansion of the virtual ward and PUSH/PULL models with Yorkshire Ambulance Services and a comprehensive Place vaccination scheme. ii. Flow through the Acute Hospital The opening of the new medical SDEC, additional medical, clinical, pharmacy and portering resource, extended operating hours for patient transport and the Community Ready Unit and Age UK delivery of medications. iii. Discharge further development of the multi-disciplinary Transfer of Care Hub to co-ordinate urgent and emergency community referrals which could otherwise result in a conveyance/admission and support timely discharge, development of the Discharge to Assess pathway and additional resource for enablement and social workers iv. Children's and mental health services including whole family approach to support the most vulnerable, targeted crisis support including extension of the safe space provision and enhanced online support <p>The plan is underpinned by a communication and engagement campaign aligned to the national campaign and adapted for local need.</p>
Implications for Health Inequalities	
4.1	<p>Deprivation factors play out in health presentations, which are heightened in winter due to cold weather and greater prevalence of infectious diseases. At individual level the plan supports the need, and there is a focus on improving multi-disciplinary working, particularly across organisations for those with more complex conditions. At system level we are reviewing demand in the emergency department and working to identify and target under or over-represented groups and high intensity users to inform how we provide care.</p>
Recommendations	
5.1	For information.