Cold Weather Plan

This Plan is to be read in conjunction with:

- Winter Plan Escalation and Surge 2013/2014
- Business Continuity Plans
- Major Incident Plan

This Plan can be accessed from the Staff Zone

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<th>Approving Committee:</th>
<th>Quality, Patient Experience &amp; Risk Group</th>
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<tr>
<td>Version:</td>
<td>V1</td>
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<tr>
<td>Approval Date:</td>
<td>November 2013</td>
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<tr>
<td>Review Date:</td>
<td>October 2014</td>
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<td>Responsible Officer:</td>
<td>Risk Manager</td>
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1.0 Introduction

Although winter weather and snow can be fun for some, these weather conditions are also associated with an increase in illness and injuries. Cold weather increases the risk of heart attacks, strokes, lung illnesses, flu and other diseases. People slip and fall in the snow or ice, sometimes suffering serious injuries. Some groups, such as older people, very young children, and people with serious medical conditions are particularly vulnerable to the effects of cold weather (appendix 1).

In 2011/12 there were 22,800 more deaths in England between the months of December 2011 to March 2012 than were observed during the non-winter months. Excess deaths are not just deaths of those who would have died anyway in the next few weeks or months due to illness or old age. There is strong evidence that some of these winter deaths are indeed “extra” and are related to cold temperatures and living in cold homes as well as infectious diseases such as influenza. Although there are several factors contributing to winter illness and death, in many cases simple preventative action could avoid many of the deaths, illnesses and injuries associated with the cold. Many of these measures need to be planned and undertaken in advance of cold weather.

2.0 Scope

This document forms part of the overarching Wirral Community NHS Trust (WCT) Plan for responding to major incidents and maintaining business continuity. It describes the action required by WCT to ensure it meets its responsibilities to deal with periods of severe cold weather (including snow and ice) and to minimise potential adverse effects on service users, staff and infrastructure.

3.0 The Cold Weather Plan for England

WCT builds on existing measures taken by DH, the NHS and local authorities to protect individuals and communities from the effects of cold weather and encourage community resilience. It outlines the key areas where public, independent and voluntary sector health and social care organisations should work together to maintain and improve integrated arrangements for planning and response in order to deliver the best outcomes possible during cold weather.

The DH cold weather plan for England 2013 and associated guidance material is available using this link.

4.0 Cold Weather Alerts

Cold Weather Alert Service was established in 2011 in collaboration between DH and the Met Office. It operates in England from 1 November to 31 March. During this period, the Met Office may forecast severe cold weather, as defined by forecasts of 2°C and/or snow and ice.
| Level 0 | Long-term planning  
All year |
|---|---|
| Level 1 | Winter preparedness and action programme  
1 November to 31 March |
| Level 2 | Severe winter weather is forecast – Alert and readiness  
Mean temperature of 2°C and/or widespread ice and heavy snow are predicted within 48 hours, with 60% confidence. |
| Level 3 | Response to severe winter weather – Severe weather action  
Severe winter weather is now occurring: mean temperature of 2°C or less and/or widespread ice and heavy snow. |
| Level 4 | Major incident – Emergency response  
Central Government will declare a Level 4 alert in the event of severe or prolonged cold weather affecting sectors other than health |

**Level 0: Long-term planning to reduce harm from cold weather**

This emphasises that year-round planning is required to build resilience and reduce the impact of cold weather. This level of alert relates to those longer-term actions that reduce the harm to health of cold weather when it occurs (e.g. housing and energy efficiency measures, and long-term sustainable approaches to influence behaviour change across health and social care professionals, communities and individuals).

These measures can also address other important health, sustainability and inequalities issues, such as addressing fuel poverty, building community resilience, providing employment opportunities, reducing carbon emissions, and the burden on health and social care services.

**Level 1: Winter preparedness and action**

Level 1 is in force throughout the winter from 1 November to 31 March and covers the moderate temperatures where the greatest total burden of excess winter death and disease occur. This is because the negative health effects of cold weather start to occur at relatively moderate mean temperatures (5-8°C depending on region) and there are normally many more days at these temperatures each winter.

Actions described at this level should be being taken throughout the winter to protect and improve health. Preparations should also be in place to protect health and ensure service continuity in the event of severe cold, and for episodes of heavy snow and/or widespread ice.

**Level 2: Alert and readiness**

Level 2 is triggered when the Met Office forecasts a 60% chance of severe winter weather, in one or more defined geographical areas within 48 hours.
Severe winter weather is defined as a mean temperature of 2°C or less and/or heavy snow and widespread ice.

Although there are usually fewer days at these low temperatures, the risk of negative health impacts increases as the temperature falls. Reactive action to prevent harm to health and manage business continuity by services would be proportionately more important were we to experience an extremely cold spell for a prolonged period. Aside from cold temperatures, snow and ice are associated with an increase in injuries and severe disruption to services.

**Level 3: Severe weather action**

This is triggered as soon as the weather described in level 2 actually happens. It indicates that severe winter weather is now happening and an impact on health services is expected.

**Level 4: National emergency**

This is reached when cold weather is so severe and/or prolonged that its effects extend outside health and social care, and may include for example power or transport problems, or water shortages, and/or where the integrity of health and social care systems is threatened. At this level, multi-sector response at national and regional levels will be required.

The decision to go to a level 4 is made at national level and will be taken in light of a cross-government assessment of the weather conditions, co-ordinated by the Civil Contingencies Secretariat (Cabinet Office).
Figure 2.5 Typical cascade of cold weather alerts

Notes:
1 NHS England area teams and CCGs should work collaboratively to ensure that between them they have a cascade mechanism for cold weather alerts to all providers of NHS commissioned care both in business as usual hours and the out-of-hours period in their area.

2 PHE centres would be expected to liaise with directors of public health to offer support, but formal alerting would be expected through usual local authority channels.
Provider organisations – health and social care (community services, hospitals, care homes, prisons)

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<td>Central government will declare a level 4 alert in the event of severe or prolonged cold weather affecting sectors other than health. All level 3 responsibilities must be maintained during a level 4 incident. Implementation of national emergency response arrangements by central government. Continue to implement business continuity arrangements.</td>
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Ensure that you are engaged with local EPRR and other strategic arrangements.
Ensure that your organisation can identify those most vulnerable to cold weather and draw up plans for joined-up support with partner organisations. Agree data-sharing arrangements within information governance principles.
Assess the longer-term implications of climate change; reduction in carbon emissions; and sustainability for longer-term business continuity.
Consider how to best mobilise and engage community organisations and support the development and implementation of community emergency plans.
Make sure that staff have identified all those vulnerable to cold weather and that arrangements are in place to support and protect them appropriately.
Work with staff on risk reduction awareness, information and education. Encourage staff to be vaccinated against flu before winter starts.
Ensure that the business continuity plan includes severe winter weather. Plan for a winter surge in demand for services.
Consider carers needs and support they can continue to give.
Work with environmental health officers on HHSRS hazard identification.

Ensure that CW alerts are going to the right staff and appropriate actions are agreed and able to be implemented, especially to protect vulnerable clients. Make sure that staff have identified all those vulnerable to cold weather and that arrangements are in place to support them appropriately.
Ensure staff are undertaking appropriate home checks when visiting clients, eg room temperature; medications and food supplies.
Hospitals and care, residential and nursing homes: ensure that rooms, particularly living rooms and bedrooms are kept warm (Figure 3.2) and that staff are taking appropriate action to protect residents from cold weather.
Work with partner agencies to co-ordinate cold weather plans; ensure data sharing and referral arrangements are in place.
Continue to work with staff on risk reduction awareness, information and education. Encourage staff to be vaccinated against flu, if not already.
Work with local authority teams to identify accident hotspots on pavements or roads, advise on gritting priorities to prevent accidents, and ensure access by utilities and other essential services.
Ensure staff aware of the business continuity plan for winter weather; plan for a winter surge in demand. Ensure carers are receiving advice and support.

Communicate alerts to staff and ensure that locally agreed CW actions take place, especially those to protect vulnerable patients/ clients.
Continue to ensure local actions for the vulnerable such as:
- arranging daily contacts/visits
- ensuring staff are undertaking appropriate home checks when visiting clients, eg room temperature, medications and food supplies
- ensure carers are receiving appropriate advice and support.

Hospitals and care, residential and nursing homes: continue to ensure that rooms, particularly living rooms and bedrooms are kept warm (Section 4.1 and Section 4.2).
Activate business continuity arrangements and emergency plans as required. Activate plans to deal with a surge in demand for services.

Communicate alerts to staff and ensure that locally agreed CW actions take place, especially those to protect vulnerable patients/ clients.
Implement local plans for contacting the vulnerable. Consider daily visits/ phone calls for high-risk individuals living on their own who have no regular contacts.
Ensure carers are receiving appropriate advice and support.
Implement plans to deal with surge in demand.
Implement business continuity arrangements.

Cold Weather Plan – Version 1
6/16
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<td>Staff training should include a specific session on the CWP and cold weather resilience where required, relevant and appropriate to local conditions. Consider how you can promote key public health messages in the surgery. For example, take advantage of clinical contacts to reinforce public health messages about cold weather and cold homes on health. Get a flu jab to help protect you and your patients. Consider using a cold weather scenario as a table-top exercise to test your business continuity arrangements. Be aware of systems to refer patients to appropriate services from other agencies. When making home visits, be aware of the room temperature in the household, and if required, know how to advise on levels that are of concern and as necessary, to signpost to other services. Consider using Keep Warm, Keep Well booklet for up-to-date information and advice for patients.</td>
<td>Take advantage of clinical contacts to reinforce public health messages about cold weather and cold homes on health. When prioritising visits, consider vulnerability to cold as a factor in decision making.</td>
<td>Be aware of a possible surge in demand in the days following a cold spell. Ensure that staff are aware of cold weather risks and are able to advise patients appropriately.</td>
<td>Central government will declare a level 4 alert in the event of severe or prolonged cold weather affecting sectors other than health. Continue actions as per level 3 unless advised to the contrary.</td>
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<td>Promote flu immunisation to both staff and patients. Ensure GPs and staff are aware of local services to improve warmth in the home. Consider training on seasonal weather and the identification of vulnerable individuals to help staff be more aware of the effects of cold weather on health; those groups of patients likely to be most vulnerable; and how they can signpost patients on to other services. Consider utilisation of tools to aid systematic identification of vulnerable individuals. Consider using opportunistic approaches to signpost appropriate patients to other services when they present for other reasons. For example, flu jab clinics can be an opportunity to promote core public health messages with vulnerable individuals.</td>
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**Frontline staff – health and social care, community and voluntary sector (including care homes)**

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<td>Work within your organisation and with partner organisations to ensure that systems are developed to support the identification and sharing of information between agencies of people who may be vulnerable to cold weather. Systematically work to improve the resilience of vulnerable people to severe cold. Ensure that all staff have been made aware of the cold weather plan and the dangers of cold weather to health and know how to spot signs and symptoms. Use clinic attendances and home visits as opportunities to identify vulnerable people and discuss winter preparedness. Work with at-risk individuals, their families and carers to ensure that they are aware of the dangers of cold weather and cold housing and how access support; ensure that there are clear arrangements for signposting to other services (eg home insulation schemes; benefits entitlements) when identified in “clinical” situations. Work with partners to ensure that vulnerable patients/clients have access to fuel supplies. Link to energy supplier priority service registers as required. Ensure that clients and colleagues are aware of, and taken advantage of flu and other vaccination programmes.</td>
<td>Identify those at risk on your caseload and make necessary changes to care plans for high-risk groups. For those with multiple agency inputs, ensure that the key worker is clearly identified and care plans consider measures to reduce risk from cold weather. Check client’s room temperature if visiting. Ensure that they have at least one room which meets recommended room temperatures. Remind clients of the actions they can take to protect themselves from the effects of severe cold; including warm clothing, warm food and drinks; keeping active as much as they are able within the context of their care plan. Continue to “signpost” those at risk clients/ patients to other services (eg home insulation schemes; benefits entitlements) when identified in “clinical” situations; use the Keep Warm Keep Well booklet for up-to-date patient information and advice. Use resources available to you for raising awareness of the health risks associated with winter weather and cold housing (for example, pharmacists have a key role in reminding people to have sufficient medicine and help with preventive medicines managements). Encourage clients and colleagues to be vaccinated against flu, if not already.</td>
<td>As appropriate, contact those most at risk and implement care plans. Continue to check client’s room temperature if visiting to ensure that clients are warm. Ensure that they have at least one room which meets recommended room temperatures. Ensure urgent signposting for those at risk (eg in cold housing) to appropriate services. Continue to remind clients of the actions they can take to protect themselves from the effects of severe cold. Consider how forecast weather conditions may impact on your work – and make appropriate arrangements. Make sure you and your teams are prepared for an influx of weather-related injuries and illnesses.</td>
<td>As appropriate, contact those at risk (visit, phone call) daily. Ensure staff can help and advise clients. Other actions as per level 2. Maintain business continuity.</td>
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5.0 Roles and Responsibilities

**Director of Operations (Executive Director for Emergency Preparedness) is responsible for:**

- deciding when, and in what form, command and control arrangements need to be initiated
- ensuring Divisional Managers are taking appropriate action to maintain continuity of service and the safety and wellbeing of service users, staff and visitors
- ensuring situation reports are prepared and the Executive Team and Trust Board are kept informed
- ensuring external stakeholders are briefed

**Director of Infection Prevention and Control is responsible for:**

- Ensuring the annual immunisation programme is coordinated annually by the Staff Flu Vaccination Planning Group.
- The group monitors staff vaccination against agreed targets and provide weekly updates to SMT during the campaign period.

**Divisional Managers are responsible for ensuring that:**

- As part of their Divisional Business Continuity Plan, plans are in place to respond to severe cold weather (including snow and ice) if forecast.
- Survive leads and team leaders are taking appropriate action to maintain continuity of service and the safety and wellbeing of service users, staff and visitors
- Situation reports are produced and forwarded at agreed frequencies

**Service leads are responsible for ensuring that:**

- Service business continuity plans are regularly reviewed
- ensure that all staff members have been made aware of the Cold Weather Plan, action card and the dangers of cold weather to health (Appendix 1) and know how to spot signs and symptoms
- communicate alerts to staff and ensure that locally agreed Cold Weather Plan actions take place, especially those to protect vulnerable service users
- That staff members have identified all those vulnerable to cold weather and that arrangements are in place to support and protect them appropriately including appropriate home visit checks e.g. room temperature, medications and food supplies
- Activate business continuity requirements as required
- Provide where appropriate suitable equipment for home visits e.g. snow grips for shoes
The Head of Estates is responsible for ensuring as part of the Estates Business Continuity Plan:

- The gritting of traffic access routes and pedestrian walkways on Trust premises.
- Identifying any potential issues relating to periods of severe cold weather (including snow and ice) and ensuring appropriate action is taken to reduce risk.
- Implementing business continuity plans as appropriate

The Risk Manager is responsible for:

- Ensuring there is an effective cascade system for informing staff that the Cold Weather alert period has started, what the preventative measures are and an escalation of the cold weather alert level.
- Ensure the Winter Escalation and surge plan can respond to a surge in demand.
- Providing advice in relation to cold weather

The Head of Communications is responsible for:

- Working with local NHS colleagues to implement the local winter communications plan
  - Health Dangers in Winter
  - Choose Well Campaign
  - Messages in the event of increasing demand
- Promoting Cold Weather Plan to staff
- Promoting Staff Flu Campaign
- Supporting the communication of any changes to our services over the holiday period
- Developing and communicating timely and appropriate messages for staff and patients if severe weather is likely to affect our services

6. WCT Alerting Routes and Responses

WCT receives cold weather alerts and forecast information directly from the Met Office via the email address resilience@wirralct.nhs.uk

On call duty managers have been given access to this account, to view the alerts.

In Hours – Alerts that require immediate attention will come via the NHS England Local area team as either an email or call to the On Call Duty Manager

On receipt of the formal notification, the alert will be cascaded in hours by the Risk Manager to:

- Divisional Managers
- Service Leads
- Communications Team
And out of hours by the Director on call to the Community Nursing Nights, GPOOH, WiCs.

WCT will follow the actions described in the appropriate cold weather action card for the level.
Appendix 1

The impact of cold weather on health

The impact of cold weather on health is predictable and mostly preventable. Direct effects of winter weather include an increase in incidents of:

- heart attack
- stroke
- respiratory disease
- influenza
- falls and injuries
- hypothermia

Indirect effects of cold include mental health illnesses such as depression, and carbon monoxide poisoning from poorly maintained or poorly ventilated boilers, cooking and heating appliances and heating.

For the purposes of this plan, key groups considered to be particularly at-risk in the event of severe cold weather are summarised below:

- older people (over 75 years old)
- otherwise “frail” older people*
- children under the age of five
- people with pre-existing chronic medical conditions such as heart disease, stroke or TIA, asthma, chronic obstructive pulmonary disease or diabetes
- people with mental ill-health that reduces individual’s ability to self-care (including dementia)
- people with learning difficulties
- people assessed as being at risk of, or having had, recurrent falls
- people who are housebound or otherwise low mobility
- people living in deprived circumstances
- people living in houses with mould
- people who are fuel poor
- elderly people who live alone and do not have additional social services support
- homeless or people sleeping rough
- other marginalised groups

* Persons, usually older, who have impairment of their activities of daily living. The frailty phenotype or a frailty index can be used to quantify frailty. Frailty in primary care: a review of its conceptualization and implications for practice. Alethea Lacas and Kenneth Rockwood. BMC Medicine 2012, 10:4 doi:10.1186/1741-7015-10-4
Cold Weather Plan for England 2013: Action cards for Cold Weather Alert Service

Frontline health and social care staff in community and care facilities

Level 0: Long-term planning – All year

- work within your organisation and with partner organisations to ensure that systems are developed to support the identification and sharing of information between agencies of people who may be vulnerable to cold weather
- systematically work to improve the resilience of vulnerable people to severe cold
- ensure that all staff members have been made aware of the Cold Weather Plan and the dangers of cold weather to health and know how to spot signs and symptoms
- use clinic attendances and home visits as opportunities to identify vulnerable people and discuss winter preparedness
- work with at-risk individuals, their families and carers to ensure that they are aware of the dangers of cold weather and cold housing and how access support; ensure that there are clear arrangements for “signposting” to other services (eg home insulation schemes; benefits entitlements) when identified in “clinical” situations
- work with partners to ensure that vulnerable patients/clients have access to fuel supplies. Link to energy supplier priority service registers as required
- ensure that clients and colleagues are aware of, and have taken advantage of, flu and other vaccination programmes

Level 1: Winter preparedness and action programme – 1 November to 31 March

- identify those at risk on your caseload and make necessary changes to care plans for high-risk groups
- for those with multiple agency inputs, ensure that the key worker is clearly identified and care plans consider measures to reduce risk from cold weather
- check client’s room temperature if visiting. Ensure that they have at least one room that meets recommended room temperatures
- remind clients of the actions they can take to protect themselves from the effects of severe cold; including warm clothing, warm food and drinks; keeping active as much as they are able within the context of their care plan
- continue to “signpost” those at risk clients/patients to other services (eg home insulation schemes; benefits entitlements) when identified in “clinical” situations; use the Keep Warm Keep Well booklet for up-to-date patient information and advice
- use resources available to you for raising awareness of the health risks associated with winter weather and cold housing (For example, pharmacist have a key role in reminding people to have sufficient medicine and help with preventive medicines management)
- encourage clients and colleagues to be vaccinated against flu, if not already

1 Action cards for Cold Weather Alert Service: Frontline health and social care staff in community and institutions
Cold Weather Plan for England 2013:
Action cards for Cold Weather Alert Service

Level 2: Severe winter weather is forecast – Alert and readiness

Mean temperature of 2°C and/or widespread ice and heavy snow are predicted within 48 hours, with 60% confidence.

• as appropriate, contact those most at risk and implement care plans
• continue to check client’s room temperature if visiting to ensure that clients are warm. Ensure that they have at least one room that meets recommended room temperatures
• ensure urgent signposting for those at risk (eg in cold housing) to appropriate services
• continue to remind clients of the actions they can take to protect themselves from the effects of severe cold
• consider how forecast weather conditions may impact on your work – and make appropriate arrangements.
• make sure you and your teams are prepared for an influx of weather-related injuries and illnesses

Level 3: Response to severe winter weather – Severe weather action

Severe winter weather is now occurring: mean temperature of 2°C or less and/or widespread ice and heavy snow

• other actions as per level 2
• as appropriate, contact those at risk (visit, phone call) daily
• ensure staff can help and advise clients.
• maintain business continuity

Level 4: Major incident – Emergency response

Central government will declare a level 4 alert in the event of severe or prolonged cold weather affecting sectors other than health.

• continue actions as per level 3 unless advised to the contrary
• implementation of national emergency response arrangements by central government

The Cold Weather Plan for England 2013 and associated documents can be accessed at www.gov.uk/phe
GPs and practice staff

Level 0: Long-term planning – All year

- be aware of emergency planning measures relevant to general practice.
  See www.england.nhs.uk/ourwork/gov/eprr
- promote flu immunisation to both staff and patients
- ensure GPs and practice staff members are aware of local services to improve warmth in the home
- consider training on seasonal weather and the identification of vulnerable individuals to help staff be more aware of the effects of cold weather on health; those groups of patients likely to be most vulnerable; and how they can signpost patients on to other services
- consider use of tools to aid systematic identification of vulnerable individuals
- consider using opportunistic approaches to signpost appropriate patients to other services when they present for other reasons. For example, flu vaccination clinics can be an opportunity to promote core public health messages with vulnerable individuals

Level 1: Winter preparedness and action programme – 1 November to 31 March

- staff training should include a specific session on the Cold Weather Plan and cold weather resilience where required, relevant and appropriate to local conditions
- consider how you can promote key public health messages in the surgery. For example, take advantage of clinical contacts to reinforce public health messages about cold weather and cold homes on health
- get a flu jab to help protect you and your patients
- consider using a cold weather scenario as a table-top exercise to test your business continuity arrangements
- be aware of systems to refer patients to appropriate services from other agencies
- when making home visits, be aware of the room temperature in the household, and if required, know how to advise on levels that are of concern and as necessary, to signpost to other services
- consider using the Keep Warm, Keep Well booklet for up-to-date information and advice for patients
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Level 2: Severe winter weather is forecast – Alert and readiness
Mean temperature of 2°C and/or widespread ice and heavy snow are predicted within 48 hours, with 60% confidence

- take advantage of clinical contacts to reinforce public health messages about cold weather and cold homes on health
- when prioritising visits, consider vulnerability to cold as a factor in decision making

Level 3: Response to severe winter weather – Severe weather action
Severe winter weather is now occurring; mean temperature of 2°C or less and/or widespread ice and heavy snow

- be aware of a possible surge in demand in the days following a cold spell
- ensure that staff members are aware of cold weather risks and are able to advise patients appropriately

Level 4: Major incident – Emergency response
Central government will declare a level 4 alert in the event of severe or prolonged cold weather affecting sectors other than health

- continue actions as per level 3 unless advised to the contrary
- implementation of national emergency response arrangements by central government

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