

## EP.03 Severe Weather Plan

<b>.Summary</b>	This plan outlines Wye Valley NHS Trusts Emergency Planning, Resilience and Response (EPRR) actions required in the event of forecasted / actual severe weather	
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## Version Control

### Change Record

Date	Author	Version	Page	Reason for change
Sept 2015 Jan 2017	Emergency Planning Officer	1.2 Severe Weather Plan Cold 1.2 Heatwave Plan	All	New plans
October 2018	Tracy Hill Emergency Planning Officer	2	All	Rewrite of both plans to combine into one plan and development of new command and control arrangements

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### Document Consultation and Distribution

Name / Role	Title
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Herefordshire Tactical Coordinating Group	Partner category 1 and 2 responders

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## 1. SCOPE

This plan applies to all employees of Wye Valley NHS Trust (WVNHST)

## **2. INTRODUCTION**

Severe weather conditions can be caused by rain; floods; heatwave; snow and solar flare that can have wide reaching effects on the NHS for example:-

- Avoidable deaths related to heart and lung conditions, infectious diseases ( Flu and norovirus) and heat related conditions
- Increased health and social care demands
- Staffing pressures
- Disruptions to:-
  - Travel
  - Logistics
  - Infrastructure
  - Resources

Herefordshire and its surrounding rural areas are subject to flooding, high snow drifts and traffic jams.

The Civil Contingencies Act (2004) and the Health and Social Care Act (2012) outlines the NHS legal responsibilities to prepare, respond and maintain healthcare resilience during severe weather events. The Government has developed multiagency plans, advice and warning guidance that are used to inform this Wye Valley NHS Trust plan

## **3. STATEMENT OF INTENT**

This plan will detail how Wye Valley NHS Trust will:-

- Communicate with its staff
- Undertake escalations that lead to the activation of a Command and Control structure to ensure a coordinated, risk assessed and informed response to ongoing healthcare delivery
- Outline the actions required to prepare for, respond to and recover from severe weather related incidents
- Outline the plans required to mitigate risk, ensure continuity of care for those in hospital and for those receiving care at home or who have been discharged
- Provide appropriate guidance and support to WVT employees and patients to maintain health, wellbeing and safety
- Work in partnership with and provide mutual aid to local responders, agencies and voluntary organisations

## **4. DUTIES**

Severe weather that occurs for at least two consecutive days can have a significant effect on people's health and may have also impact on the delivery of healthcare services.

### **4.1 NHS Severe Weather Monitoring**

In order to enable healthcare providers to prepare, two agencies monitor the weather and issue alerts to the UK and NHS

The Met Office, that provides general weather information and National weather alerts  
<https://www.metoffice.gov.uk/>.

Public Health England through Health Watch  
<https://www.metoffice.gov.uk/health/yourhealth/hot-weather-and-health/heat-health-watch-service>

Level 1,2,3 alerts are cascaded to the NHS, where locally the WVT communication team disseminate the alert across the Trust to ensure that staff are alerted to take personal care action and commence healthcare actions

#### 4.2 Severe Weather Alert Levels

<b>Level 0</b>	<b>Long term planning – All year</b>
<b>Level 1</b>	<b>Preparedness</b> Winter : 1 November – 31 March Heatwave preparedness: 1 June – 15 September
<b>Level 2</b>	<b>Severe weather is forecast (60% confidence) – alert and readiness</b> <ul style="list-style-type: none"> <li>• 2 degrees or less for at least 48 hrs +/- of widespread ice , heavy snow</li> <li>• 30 °C by day and 15 °C overnight for at least two consecutive days</li> </ul>
<b>Level 3</b>	<b>Severe weather now occurring - Respond to severe weather</b>
<b>Level 4</b>	<b>Major Incident – Emergency Response</b> Central Government will declare level 4 where prolonged weather affecting sectors other than health

#### 5. WVT Command and Control Arrangements

<b>Level 0</b>	<b>Directorates development of business continuity plans</b>
<b>Level 1</b>	<b>Directorates preparedness / testing</b>
<b>Level 2</b>	<b>Divisional activation of Directorate Business continuity plans</b> <b>Assess ability to deliver Critical services / mitigation</b> <b>Escalate risk to Executive Director</b>
<b>Level 3</b>	<b>Executive Director activation of WVT Adverse Weather cell for Senior management of Organisational Business Continuity</b>
<b>Level4</b>	<b>Executive Director activation of WVT Major Emergency / Incident policy</b>

#### 5.1 WVT Adverse Weather Cell Structure

The purpose of the “Adverse weather cell” structure is to ensure an appropriate senior response to outline a strategy, provide tactical leadership and commence operational coordination of the organisational response to the severe weather warning. A senior managers Adverse Weather Cell checklist check list is available in this document Appendix 3 page 25.

It is suggested that the Adverse Weather Cell structure is:

- Open 24 hrs for the duration of the severe weather event

Directed by:

- The Chief Operating Officer or Deputy Chief Operating Officer/Executive on call (Level 4) (SILVER)

Tactically delivered by (BRONZE)

- 1 x senior manager
- 1 x Band 7
- 2 x Administrative support

Operationally supported by:-

- Loggist
- Communications representative
- Medical staffing representative
- Nursing representative
- Allied Health Professional representative
- Human Resources representative
- Referral Management Centre representative
- Patient flow representative
- Estates representative
- ICT representative ( in event of solar flares impacting on IT equipment)

### 5.1.2. WVT Adverse Weather Cell Actions

Being minimally to:-

- Act as the Senior authority to deliver the WVT organisational tactical response
- Brief WVT Senior managers and on call Level 3 and 4 of preparedness actions underway and the requirement to be available on site
- Provide ongoing 24hr WVT senior cover until stood down ( including accommodation and arrangements for expense claims)
- Determine if the co-opt of partner organisations command and control is additionally required at WVT e.g.: 2Gether Trust, Taurus, Herefordshire Council Emergency Planners, Volunteer agencies
- Set up a coordination centre with suitable contact arrangements that are disseminated to the organisation and partner organisations
- Define times of regular briefings from operational leads
- Risk Assess the current situation and any likely impacts to immediate/24-48hr/ medium term/recovery of health care services, taking into account minimally :-
  - Laboratories, pharmaceutical and food storage, utilities (water, electricity, water, IT servers), estates, supplies, resources, access and egress)
- Define critical service delivery and mitigations required to ensure delivery of critical services
- Define critical service/vulnerable patient's requirements for inpatient acute/ maternity/ community and home based care
- Determine the transport suppliers skills/ equipment/ DBS clearance/ insurance to determine type of conveyance that can be undertaken i.e.: staff only ; staff and patients; send WVT escorts
- Define the organisational contingency measures required

- Liaise with supporting services and agree standby/ activation procedures and communication pathways e.g.: 4 x 4 providers, accommodation
- Direct and co-ordinate the measures to minimise the effects
- Co-ordinate responses to any developing situation
- Use multiagency plans and liaison to request support / provide mutual aid
- Raise Purchase Order Numbers to enable multi-agency billing to the trust for the provision of staff supporting WVT command and control and services
- To receive the requests from those requesting the 4x4 Service
- To check that all avenues have been explored such as lift sharing and use of taxi's
- To ensure that the request forms are completed fully and sequential
- Securely share information across organisations
- Ensure staff and public receive appropriate information and advice
- Brief CCG and NHS England e.g.: teleconference, Sitreps
- Be cognisant of patient flow
- Escalate to the Executive (Level 4) on call/ GOLD where events require activation of the major emergency / incident policy and / or activation of the Tactical Coordinating Committee (TCG)
- Undertake GOLD/ SILVER / BRONZE duties outlined in the major emergency / incident plan

### **5.1.3. WVT Adverse Weather Cell responsibilities**

Being minimally to:-

- Instruct the reduction in severe weather related non-essential services across all Divisions
- Standby/ activate supporting services e.g.: 4 x 4 providers, accommodation
- Define extraordinary HR arrangements e.g.:
  - Escalation via line managers
  - 4 x 4 eligibility
  - accommodation eligibility
  - Not to leave work early as all staff required as part of wider response
  - Priority of staff support i.e.: to critical service staff inwards
  - redeployment / alternative working
  - absence arrangements
  - Study leave management
  - AL management
  - Ferrying other staff and need for business insurance, RBS checks
  - Staff safety and welfare advice – AA /RAC guides, preparedness i.e.: snow chains, fluids, shovels , overnight bags
- Ensure adequate, phased staffing levels within all essential clinical and non-clinical areas
- Safe working environment, conditions and appropriate mitigation
- Organise a coordinated multiagency response to maximise capacity and reduce delays i.e.: define other organisation usage / available areas for accommodation (Herefordshire Council, 2Gether Trust, Primary Care, Adult Social Care) and agree share arrangements
- Organise logistics that enable a multiagency response ( e.g.: parking, Temporary ID, access to Wi-Fi, orientation, invoices arrangements)

- Organise accommodation / designated areas on / off site for staff , discharged patients and visitors who are unable to get home
- Coordinate Divisional approved request for accommodation and 4 x 4 transport
- Coordinate staff redeployment to critical areas
- Instruct patient transport priorities for discharge, transfer, appointments
- Instruct on patient cancellation : Outpatients, Electives
- Act on health and safety issues arising from the adverse weather
- Create communication plan, staff and service users advice, staff briefings
- Create recovery plans and instruct stand down
- Authorise additional resources for catering, domestic, supplies, equipment
- Monitor severe weather alerts and information e.g.: flood alerts, environment agency, Met Office
- Identify any financial impact
- Collate robust record keeping of eligible staff allocate 4 x 4 / accommodation to enable reconciliation of invoices to the Trust
- Create 24hr adverse weather cell rota

## 5.2 WVT Divisional Responsibilities

- Undertaking actions coming-out of the Adverse Weather cell
- Identifying the minimum staff levels and clinical requirements
- Organising staff rotas, delegation
- Advising staff on extra-ordinary HR arrangements
- Organise coordinated receipt of 4 x 4 requests
- Collate accommodation requirements for staff
- Application of eligibility assessment for 4 x 4 provision
- Provide 4 x 4 request information to the Adverse weather cell
- Organising arrangements for the Monitoring and recording staff absence, changes to rotas, updating IT systems
- Ensuring all departments are undertaking appropriate Business Continuity
- Escalating new issues
- Ensure severe weather related Quality and Safety and governance checks in support of appropriate patient care and staff welfare

## 5.3 WVT Staff Clinical Responsibilities

WVT staff providing clinical care to patients during severe weather conditions should consider the following

- Identifying and reporting Vulnerable Patients
- Deliver critical services as determined by the Severe weather cell
- Escalate weather related concerns affecting patient to line managers
- Provide Extra blankets when/ if required
- Provide Electric fans (where approved by Infection Prevention team) / air conditioning/ reduce heating / opening window, providing shade
- Ensure Patients are dressed appropriately during transfers, exiting the premises
- Discourage patients from leaving the hospital building, unless discharged, in severe cold weather due to increased risk of hypothermia, effects of cold on recovery or falls
- Undertake increased monitoring of vulnerable patients
- Provide Increased hot drinks / cool drinks to patients



- Provide appropriate severe weather guidance to patients
- Check that patients are prepared on discharge e.g.: heating ,shopping, access to support
- Patient Visitors
- Consider flexible visiting.
- Visitors should be made aware of where facilities are within the Hospital to enable them to purchase hot food and drinks

#### **5.4 Estates and Private Finance Initiative (PFI) partners**

It is normal practice for Estates and PFI Partners liaise directly to activate business continuity arrangements e.g.: pathway clearance, gritting of the site, drain clearance, standby oil fuelled generators

It is expected that the Estate team and Adverse Weather Cell will liaise in the event of any untoward issues outside of normal business, minimally .:

- Briefing of untoward estates affects from the severe weather
- Additional supplies i.e.: linen, catering
- Requirement for additional cooling / heating equipment
- Site clearance : staff / patient parking
- Enhanced staffing resources: estates, porters, catering , domestics
- Change to use of premises e.g.: staff / patient / visitor accommodation
- Prolonged utilities impacts

#### **5.5 Multiagency support**

The Severe Weather cell may determine that WVT requires additional support and can approach multiagency to discuss opportunity for assistance, for example:-

- WVT staff volunteers with 4 x 4 vehicles and holding business insurance ( *drivers complete WVT expenses claim*)
- Herefordshire Council Emergency Planning Officer- 4 x 4 vehicles (statutory and volunteers) to assist with critical staff collection for duty (*invoiced to WVT*)
- Fire Brigade – can assist (in extremis) with drive clearance to enable patient discharge
- Red Cross/ St John Ambulance/ Private Ambulances: additional patient discharge (*invoiced to WVT*)
- Request for NHS England activation of Mutual Aid – other healthcare organisation 4 x 4 provision
- Military Assistance to Civilian Agencies ( MACA)- 4 x 4 transport (in extremis and under defined and time limited and requested via WVT GOLD )

Contact details of available multiagency support is held by WVT managers with command and control responsibilities However it must be considered that these organisations may also be receiving requests from other Herefordshire/ Worcestershire organisations and are also facing their own challenges.

#### **5.6 Tactical Coordinating Group (TCG)**

Where a provider organisation command and control (e.g.: WVT Severe Weather cell) determines that a coordinated multi agency response is required, a request to activate the TCG can be made to the Police Operations Room

The TCG is formally activated and chaired by the West Mercia Police; if activated the TCG will assume management and coordination of multi-agency resources and activities across Herefordshire involving:-

- NHS
- Public Health
- Herefordshire Clinical Commissioning Group (CCG)
- Environment Agency
- Herefordshire Council
- Police
- Military/ RAF
- Network Rail
- West Midlands Ambulance Service ( including liaison with Welsh ambulance )
- Hereford & Worcester Fire Service

## **6 PROCEDURES AND PLANNING**

### **6.1 Recognising potential effects from Severe Weather**

Extreme temperatures during the winter and summer can result in significant rise in deaths and substantial increase in illnesses and challenging working conditions for WVT staff

### **6.2. Patient and service users**

On notification of a severe weather alert WVT staff should advise patients and service users on how to avoid ill these effects, be vigilant to and prepared to clinically respond to a potential rise in the following conditions listed in **figure 1**

On notification of a severe weather alerts WVT staff must identify their vulnerable patient groups as listed in **figure 2** and activate business continuity plans to protect them wherever possible

### **6.3 Staff working conditions**

Workplace temperatures are covered by the Workplace (Health, Safety and Welfare) Regulations 1992 and the Management of Health and Safety at Work Regulations 1999. Which place a legal obligation on employers to provide a 'reasonable' temperature in the workplace and take action where necessary and where reasonably practicable.

The minimum temperature in a workplace should normally be at least 16 degrees Celsius or at least 13 degrees Celsius where the work involves rigorous physical effort.

A maximum figure cannot be given due to the high temperatures found in, for example, glass works or foundries where it is still possible to work safely provided appropriate controls are present.

These temperatures are not absolute legal requirements; the employer has a duty to determine what reasonable comfort will be in the particular circumstances. Arrangement specific to Staff travel during severe weather are detailed in section.

## 6.4 Identifying WVT Vulnerable patients and service users

**Figure 1. Potential clinical affects during severe weather**

HEATWAVE	COLD
<p>Respiratory and Cardiovascular diseases</p> <p>Heat cramps caused by dehydration and loss of electrolytes, often following exercise</p> <p>Heat rash – small, red, itchy papules</p> <p>Heat oedema – mainly in the ankles, due to vasodilation and retention of fluid</p> <p>Heat syncope – dizziness and fainting, due to dehydration, vasodilation, cardiovascular disease and certain medications</p> <p>Sunburn –causing blistering, swelling of the skin or fever</p> <p>Heat exhaustion) - as a result of water or sodium depletion, with non-specific features of malaise, vomiting and circulatory collapse, and is present when the core temperature is between 37°C and 40°C. Left untreated, heat exhaustion may evolve into heatstroke</p> <p>Heatstroke – can become a point of no return whereby the body’s thermoregulation mechanism fails. This leads to a medical emergency, with symptoms of confusion; disorientation; convulsions; unconsciousness; hot dry skin; and core body temperature exceeding 40°C for between 45 minutes and eight hours. It can result in cell death, organ failure, brain damage</p>	<p>Heart attack</p> <p>Stroke</p> <p>Respiratory disease</p> <p>Influenza</p> <p>Falls and injuries</p> <p>Hypothermia</p> <p>Indirect effects:-</p> <p>Mental health illnesses such as depression</p> <p>carbon monoxide poisoning from poorly maintained or poorly ventilated boilers cooking and heating appliances and heating</p>

**Figure 2: Vulnerable groups in severe weather**

HEATWAVE	COLD
<b>Older age / a risk of, or having had, recurrent falls:</b> especially over 75 years old, or those living on their own, frail housebound or otherwise low mobility who are socially isolated, or in a care home	
<b>Chronic and severe illness:</b> including heart conditions, diabetes, respiratory or renal insufficiency, Parkinson's disease or severe mental illness. Medications that potentially affect renal function, the body's ability to sweat, thermoregulation (e.g. psychiatric medications) or electrolyte balance (diuretics) can make this group more vulnerable to the effects of heat	<b>Pre-existing chronic medical conditions</b> such as heart disease, stroke or TIA, asthma, chronic obstructive pulmonary disease or diabetes
<b>Infants</b> are vulnerable to heat due to immature thermoregulation, smaller body mass and blood volume, high dependency level, dehydration risk in case of diarrhoea	<b>Pregnant women</b> (in view of potential impact of cold on foetus) <b>Children under the age of five</b>
<b>Homeless people/ other marginalised or socially isolated individuals or groups</b> can have higher rates of chronic disease (often poorly controlled), smoking, respiratory conditions, substance dependencies and mental illness on top of social isolation, lack of air conditioning, heating cognitive impairment, living alone ,exposure to urban heat islands or extreme cold	
<b>People with alcohol dependence and drug dependence</b> often have poorer overall health and increased social isolation which can increase their risk	
<b>Inability to adapt behaviour</b> to keep cool or warm such as having Alzheimer's, a disability, mental ill-health, learning difficulties, being bed bound, drug and alcohol dependencies, babies and the very young environmental factors	
<b>Overexposure:</b> living in urban areas and south-facing top-floor flats, being homeless, activities or jobs that are in hot places or outdoors and include high levels of physical exertion, children and adults taking part in organised sports (particularly children and adolescents).	<b>living in deprived circumstances</b> living in houses with mould people who are fuel poor

## 6.5 WVT actions required during severe weather

WVT staff must be aware of the severe weather levels and undertake specific actions on notification of a severe weather alert.

These levels and actions are detailed in **figure 3** of this plan (*Full multiagency actions are detailed in the England heatwave and cold plans*)

<b>Figure 3: WVT SEVERE WEATHER ACTIONS AND RESPONSIBILITIES MATRIX</b>			
<b>LEVEL</b>	<b>GOVERNMENT ADVICE</b>	<b>WVT ACTIONS REQUIRED</b>	<b>WVT RESPONSIBILITIES</b>
Level 0	Long term planning, all year round	<p>Ensure organisation can identify and support most vulnerable and improve resilience of high-risk individuals work with commissioners to develop longer term plans to prepare</p> <p>Plan for joined up support with partner organisations.</p> <p>Work with partners and staff on risk reduction awareness (e.g. flu vaccinations, signposting for winter warmth initiatives)</p> <p>prepare business continuity plans</p> <p>Ensure awareness of health effects of heat/ cold and how to spot symptoms</p> <p>Encourage colleagues/clients to have flu vaccinations</p> <p>Engage with local statutory partners to agree how VCS can contribute to local community resilience arrangements.</p> <p>Develop a community emergency plan to identify and support vulnerable neighbours</p> <p>Encourage healthcare users to:-</p> <p>Refer to key public health messages</p> <p>Seek good advice about improving the energy efficiency of homes and staying warm in winter; have all gas, solid fuel and oil burning appliances serviced by an appropriately registered engineer</p> <p>Check entitlements and benefits; seek income maximisation advice and other services.</p> <p>Get a flu jab (September/October)</p> <p>Encourage cycling/walking where possible to reduce heat levels and poor air quality in urban areas</p>	<p><b>Executives</b> develop strategy</p> <p><b>Divisions</b> develop business continuity plans</p> <p><b>Directorates</b> deliver services, develop and monitor service delivery</p> <p><b>Clinical staff</b> provide healthcare, advise service users and escalate any concerns to Directorates</p>
Level 1	Winter preparedness and action	<p>Ensure weather alerts are going to right staff and actions agreed and implemented</p> <p>Ensure staff in all settings are considering room temperature</p> <p>Ensure data sharing and referral arrangements in place</p> <p>Identify vulnerable clients on caseload; ensure care plans incorporate cold risk reduction.</p> <p>Check room temperatures and ensure referral as appropriate</p>	

		<p>Signpost clients to other services using 'Keep Warm Keep Well' booklet</p> <p>Test community emergency plans to ensure that roles, responsibilities and actions are clear.</p> <p>Set up rotas of volunteers to keep the community safe in cold weather and check on vulnerable people</p> <p>Actively engage with vulnerable people and support them to seek help</p> <p>Encourage healthcare users to:- If receiving social care or health services ask your GP, key worker or other contact about staying healthy in winter and services available.</p> <p>Check room temperatures</p>	
Level 2	severe winter weather is forecast – alert and readiness	<p>Continue level 1 actions.</p> <p>Ensure sufficient blankets , heating / cold water and ice + hydration monitoring</p> <p>Ensure carers receiving support and advice.</p> <p>Activate business continuity arrangements as required; plan for surge in demand across WVT</p> <p>Consider prioritising those most vulnerable and provide advice as appropriate.</p> <p>Check room temperatures and ensure urgent referral as appropriate</p> <p>Continue to actively engage vulnerable people known to be at risk and check on welfare regularly</p> <p>Encourage healthcare users to :- Stay tuned into the weather forecast</p> <p>Ensure stocked with food and medications in advance</p> <p>Take the weather into account when planning your activity</p>	<p>As level 0-1 &amp;</p> <p><b>Divisions :-</b> Undertake cumulative risk assessment Review business continuity plans Escalate unmitigated risk to Executive</p> <p><b>Directorate</b> Ensure leads informed to be prepared Seek assurance of ongoing delivery Identify critical risk Escalate any concern to Divisions</p>
Level 3	response to severe winter weather – severe weather	<p>Continue level 2.</p> <p>Implement emergency and business continuity plans; expect surge in demand in near future</p> <p>Check indoor temperatures are recorded regularly during the hottest</p> <p>Ensure staff are monitoring for adverse effects</p>	<p>As level 2 &amp;</p> <p><b>Executive</b> Assess/ Activate command and control</p>

	action	<p>regularly and aware to escalate  Implement local plans to ensure vulnerable people contacted  Implement emergency and business continuity plans; expect surge in demand  Ensure discharge planning takes home temperatures and support into account  Prioritise those most vulnerable.  Encourage healthcare users to:-  Continue level 2 actions.  Dress warmly; take warm food drinks regularly; keep active. If you have to go out, take appropriate precautions.  Check on those you know are at risk</p>	<p>arrangements for critical business continuity</p> <p><b>Divisions</b>  Provide severe weather coordination team</p>
Level 4	major incident – emergency response, declared by central government	<p>Level 4 alert issued at national level in light of cross-government assessment of the weather conditions, coordinated by the Civil Contingencies Secretariat (CCS) based in the Cabinet Office.  All level 3 responsibilities to be maintained unless advised to the contrary  Encourage healthcare users to :-  Follow key public health and weather alert messages as broadcast on the media.</p>	<p>As level 3 +  <b>Executive</b> activate WVT major incident plan</p>

## 6.6 Staff travel during severe weather

WVT staff are an essential resource and in severe weather can experience difficulties in travel to and from work and any loss can have serious effects on the Trusts ability to continue deliver healthcare services. On receipt of an alert, the Trust will be undertaking a review of service delivery and options for staff who may have difficulties accessing or leaving their place of work. In support of this it is expected that:-

- All staff (admin, clinical, medical, AHP) will remain at work for the duration of their shift and not to leave early
- Will take all reasonable efforts to access their usual place of work and to escalate immediately to their line manager when unable to do so

It is known that staff working at WVT will at some stage of their working life be affected by flooding, snow and ice and long journeys across rural areas. Equally it is understood that severe weather can be worrying for some staff, as such the Trust does not advocate any staff taking unsafe practices to access their place work and return home during severe weather events.

Therefore it is essential that WVT staff prepare for these likely effects and undertake the appropriate planning in order to attend their place of work during severe weather events.

Examples being:-

- Be aware of latest advice of what to do in floods, snow, ice, prolonged waits
- Keep abreast of flooding alerts and traffic reports
- Have access to appropriate resources e.g.: foot wear, clothing, fuel, blankets, fluids, snow shovel, snow chains, overnight bags and charged mobile phones
- Plan ahead e.g.: review alternative travel options, set off earlier
- Make alternative arrangements e.g.: accommodation, child care, parking on flat accessible ground in advance
- Consider opportunities for sharing lifts with staff who own a 4 x 4 ( *Note: the driver must have DBS clearance and hold vehicle business insurance*)

Regardless of severe weather, the Trust must continue to deliver healthcare where normal service delivery is affected, will need to consider activating an emergency response, that may include:-

- Closure of non-essential services
- Redeployment of staff with appropriate skills or able to work with direct/ indirect supervision to other areas of the organisation
- Changes to off- duties and rotas in order to deliver essential services

## 6.7 Severe Weather Information for patients and staff

**Winter Driving:** <http://www.rac.co.uk/drive/advice/winter-driving/>

**Keeping Warm:** <http://www.nhs.uk/Livewell/winterhealth/Pages/KeepWarmKeepWell.aspx>

**Get ready for winter:** <http://www.metoffice.gov.uk/learning/get-ready-for-winter>

Severe Weather Warnings:

<http://www.metoffice.gov.uk/public/weather/warnings/?regionName=uk>

**Herefordshire Road Closures:** <https://www.herefordshire.gov.uk/transport-and-highways/maintenance/roads-closures-and-diversions>



## 7. WVT Emergency Response during severe weather

On receipt of severe weather alerts WVT will review the required emergency response e.g.:

- Warn and inform
- Standby and prepare
  - Activate plans
  - Stand-down

### 7.1 Provision of additional resources to ensure the continued delivery of critical services

In extreme severe weather conditions WVT may use additional resources to ensure the continued delivery of critical services, for example transportation of essential staff using 4 x 4 vehicles and activating alternative accommodation arrangements e.g. Staying on site, using of B & B, hotels and welfare centres

The WVT “adverse weather cell” will assume command and control to ensure appropriate contractual arrangements, health and safety and equitable Herefordshire access is achieved, and will consider minimally:

- DBS clearance
- Determine the areas covered
- Determine the type of transport
- Determine the number of vehicles and capacity
- Timescales
- Expected arrival on site from activation
- How coordination with the drivers will be organised
- Any special provisions for drivers
- How the drivers are identified
- Assurance that drivers are aware that only those authorised by the “Adverse Weather cell” must be undertaken
- Staff collection and drop off points
- Arrangements to escalate concerns
- checking in and out arrangements

The Line managers / medical staffing dept. will:-

- Ensure that WVT staff are advised of the request process and the requirement to complete a 4 x 4 request form
- Review in line with the eligibility criteria and where appropriate will progressed to the “Adverse Weather Cell” for consideration

### 7.2 Eligibility

Emergency provisions in support staff and patients will in high demand across all provider organisations e.g.: ambulance, police, primary care, social care and mental health services. Additionally access cannot be guaranteed as they are dependent on the availability, resource requirements of other organisations and overall critical requirements

Access to emergency transport or accommodation will be considered for the following groups:-

- Critical work areas whose staff are facing difficulties accessing their place of work and required to work on the next shift, part of on call arrangements

- Patients who cannot be discharged using regular non-urgent transport and inpatient capacity is essential
- Those approved for booking by the “WVT Adverse weather cell”

Whilst the organisation will make every effort to provide emergency support to eligible staff, staff must be aware that:-

- Eligibility is not continuous and requires repeated requests are subject to re-application process and eligibility assessment that may be rejected at a later stage in line with changing Trust priorities
- Priority will be given to the provision of healthcare
- There may be a prolonged wait to return home
- There may be an early collection for duty
- There may be multiple staff from different organisations travelling and multiple drop at points during collection / drop off home
- B&B / Hotel accommodation cannot be chosen by the individual and is subject to financial standing instruction
- Emergency provisions may change

### **7.3 Staff Request for support**

WVT staff requests for support will be subject to eligibility assessment and rationalisation. Therefore in advance of making a request, it is expected that all reasonable and practical measures have been taken before requesting 4 x 4 transport, for example:-

Staff has exhausted options for:

- Alternative transport i.e.: bus, taxi, train
- Walking a reasonable distance
- Vehicle sharing
- Sourcing own temporary accommodation

Line manager confirms

- WVT emergency accommodation is not appropriate/ available
- Shift swaps not appropriate / available
- Staff required for the next sequential shift

The Adverse Weather Cell confirms that:-

- Staff is essential to critical service delivery
- Weather conditions and access are expected to remain severe
- Release of in patient capacity is essential

### **7.4 Confirmation and coordination**

The Adverse Weather Cell will identify and inform staff that are eligible and will coordinate the approved requests into:-

- Priority for arrival
- Shift times from – to
- Collection points/ Drop off points/ accommodation allocation
- coordinate multiple staff collection / drop off according to area of residence
- Identify opportunities for shared working with provider organisations
- Provide summary of journeys/ accommodation in support of financial cost to the trust
- Inform staff of arrangements

It is expected that those WVT staff are allocated an emergency provision (at nil cost to staff) that the staff:-

- Will be waiting at the designated collection / drop off area at the time organised

- Make any change known to plan known immediately to the “Adverse Weather cell” (*ext. number will be made known on confirmation of the booking*)
- Are not authorised to request journeys directly with the driver
- Are not authorised to use the emergency provision outside of the terms detailed by the “Adverse Weather cell”

## 8. TRAINING AND EXERCISING

Training is to be delivered events/ incidents connected to this policy however individual training isn't necessary for this policy to be affective or in place. An outline of the Trusts Emergency Planning, including signposting to the Emergency planning pages are available on the Intranet. Each department will be responsible for identifying the training needs of their staff and this is to be built into individuals and departmental training programmes. Line managers are to maintain a record of such training; the Emergency Planning Officer (EPO) will support the delivery of such training

## 9. ASSOCIATED DOCUMENTS

WVT Major Emergency Incident policy  
WVT EPRR Policy

**Cold weather** <https://www.england.nhs.uk/ourwork/epr/s/w/#coldplan>

### Heatwave

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/711503/Heatwave\\_plan\\_for\\_England\\_2018.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/711503/Heatwave_plan_for_England_2018.pdf)

### Healthcare Weather alerts

<https://www.england.nhs.uk/ourwork/epr/s/w/#coldweather>  
<https://www.metoffice.gov.uk/public/weather/heat-health/#?tab=heatHealth>

### Public Flood Advice

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/401980/flood\\_leaflet\\_2015\\_final.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/401980/flood_leaflet_2015_final.pdf)

### National Weather monitoring Agencies

Environmental Agency: <https://www.gov.uk/government/organisations/environment-agency>

Meteorological Office: <https://www.metoffice.gov.uk/>

## 10. REFERENCES

Hyperlinks are made available within the relevant sections of this policy

## 11. ABBREVIATIONS AND ANCRONYMS

AEO	Accountable Executive Officer
CCA	Civil Contingencies Act
EPO	Emergency Planning Officer
EPRR	Emergency Preparedness Resilience and Response
CCG	Clinical Commissioning Group
Heatwave	Extreme heat when temperatures remain abnormally high over more than a couple of days. This is linked with the 'Heat Health Watch' system operating from 1 June to 15 September, based on Met Office forecasts which work on threshold temperatures of 30°C for the day and Night 15°C.
ICC	Incident Control Centre
ICT	Information and communications technology
MACA	Military Aid to the Civil Authority
MTC	Major Trauma Centre
PFI	Private Finance Initiative
PHE	Public Health England
Urban heat island	An urban area or metropolitan area that is significantly warmer than its surrounding rural areas due to human activities. UHI is most noticeable during the summer and winter
SITREP	Situation Report
TCG	Tactical Coordinating Group
WVT	Wye Valley NHS Trust

## 12. MONITORING COMPLIANCE WITH THIS DOCUMENT

Aspect of compliance or effectiveness being monitored	Monitoring Method	responsible for the monitoring	Frequency	Group/ committee which will receive the findings / monitoring report	Group / committee / individual responsible for ensuring that the actions are completed
Preparedness of departmental emergency/ business continuity plans	Check of department plans	Directorates Divisions Board	Following response to severe weather alerts  12 monthly	Adverse Weather cell staff  Directorate business continuity assurance	AEO/ EPL  Divisional Performance monitoring

### 13. EQUALITY IMPACT ASSESSMENTS

1	<b>Name and Job Title of person completing assessment</b>	Tracy Hill
2	<b>Name of service, policy or function being assessed</b>	Adverse Weather Policy
3	<b>What are the main objectives or aims of the service/policy/function?</b>	This plan outlines Wye Valley NHS Trusts Emergency Planning, Resilience and Response (EPRR) actions required in the event of forecasted / actual severe weather
4	<b>Date</b>	15.10.18

#### Stage 1: Initial Screening

5	<b>What evidence is available to suggest that the proposed service/policy/function could have an impact on people from the protected characteristics? Document reasons, e.g. research, results of consultation, monitoring data and assess relevance as: <i>Not relevant or Relevant Low/Medium/High</i></b>		
	Protected Characteristic	Relevance	Evidence
A	Race	Not relevant	
B	Religion/Spirituality	Not relevant	
C	Gender	Not relevant	
D	Disability	Not relevant	
E	Sexual Orientation	Not relevant	
F	Age	Not relevant	
G	Pregnancy/maternity	Not relevant	
H	Gender reassignment	Not relevant	
I	Marriage and Civil Partnership	Not relevant	
J	Carers	Not relevant	
If you assess the service/policy/function as <b>not relevant</b> , please proceed to section 11. If you assess the service/policy/function as <b>relevant</b> , continue to Stage 2, Full Equality Impact Assessment.			

#### Stage 2: Full Equality Impact Assessment

6	<b>Are there service user, public or staff concerns that the proposed service/policy/function may be discriminatory, or have an adverse impact on people from the protected characteristics?</b>		
A	Public	Not applicable	
B	Staff	Not applicable	
If there are <b>no concerns</b> proceed to section 11. If there <b>are concerns</b> , amend service/policy/function to mitigate adverse impact, consider actions to eliminate adverse impact, or justify adverse impact			
7	<b>Can the adverse impact be justified</b>		
Not applicable			
8	<b>What changes were made to the service/policy/function as result of information gathering?</b>		
Not applicable			
9	<b>What arrangements will you put in place to monitor impact of the proposed service/policy/function on individuals from the protected characteristics?</b>		
Not applicable			
10	<b>List below actions you will take to address any unjustified impact and promote</b>		

<b>equality of outcome for individuals from protected characteristics. Consider actions for any procedures, services, training and projects related to the service/policy/function which have the potential to promote equality.</b>		
<b>Action</b>	<b>Lead</b>	<b>Timescales</b>
Not applicable		
<b>11</b>	<b>Review date</b>	
I am satisfied that this service/policy/function has been successfully equality impact assessed. Date: 15.10.18 Author: Tracy Hill Emergency Planning Officer		

#### **14. FURTHER INFORMATION AND POLICY FEEDBACK**

Any amendments or suggestions for amendment to this plan should be made to:  
 Emergency Planning Officer  
 Tracy.hill@wvt.nhs.uk  
 Wye Valley NHS Trust  
 County Hospital  
 Stonebow Road  
 Hereford  
 HR1 2ER

#### **15. APPENDICES**

Appendix 1: Wye Valley NHS Trust Severe Weather Accommodation / 4 x 4 vehicle transportation request form (2 pages)

Appendix 2: Wye Valley NHS Trust Severe Weather Cell 4x4 journeys schedule

Appendix 3: Adverse Weather Cell checklist

## APPENDIX 1

### Severe Weather Accommodation / 4 x 4 vehicle transportation request form (2 pages)

1. It is expected that the staff member considers all reasonable and practical measures before completing an application
  - ✓ Cognisant of the WVT Severe Weather plan and the need to rationalise requests
  - ✓ Exhausted authorised options to work alternatively e.g.: swap shifts / work from home/ TOIL/ AL
  - ✓ Accessed appropriate driving advice
  - ✓ Exhausted alternative public transport i.e.: bus, taxi, train
  - ✓ Exhausted personal transport options e.g. Friends/ neighbours / colleagues with 4 x 4 vehicles
  - ✓ Is unable to walk a reasonable distance
  - ✓ Is unable to source temporary accommodation (outside of paying privately)
  - ✓ Your Line Manager supports your application
  - ✓ Work area deemed as an organisational priority?
  - ✓ Required to work on the next shift/ part of on call arrangements
  - ✓ If transport is allocated and is deemed by the transport service to have been an unnecessary journey - you will bear the cost at 60p per mile and an admin charge of £10 each journey
  
2. Complete the application and give to your line manager to sign and forward to the command and control team (WVT Adverse weather cell) for consideration
  
3. The WVT Adverse weather cell will:-
  - ✓ Determine the eligibility / priorities
  - ✓ Authorise/ reject requests
  - ✓ Liaise and activate 4 x 4 service/ accommodation provision
  - ✓ Inform the line manager / staff of outcome
  - ✓ Collate overall Journeys for payment ( **60p per mile**) to be borne by Wye Valley NHS Trust
  - ✓ Collate wasted journeys for payment ( 60p per mile) to be borne by the individual
  
4. If allocated 4 x 4 transport/ accommodation staff must be aware that:-
  - ✓ Allocation of 4 x 4 / accommodation can change in line with changing Trust priorities
  - ✓ Eligibility is not continuous and subject to a re-application
  - ✓ There may be multiple staff from different organisations travelling and multiple drop at points during collection / drop off home
  - ✓ There may be an early collection
  - ✓ There may be a prolonged wait to return home
  - ✓ B&B / Hotel accommodation cannot be chosen by the individual and is subject to a financial cap ( financial standing instruction)
  - ✓ Emergency provisions may change

**APPENDIX 2**

<b>Type of Support required</b> (circle)	4 x 4 staff transport 4 x 4 Patient transport Staff Accommodation Other:	<b>Patient status Clinical needs during journey:</b> (circle)	Discharged / Transfer to other healthcare Independent / requires clinical care throughout journey No escort / escort required Chair / wheelchair /Stretcher Drive to be cleared to gain access
<b>What actions taken to date to access work / place of</b>		<b>Accommodation Type</b> (circle)	Essential on WVT site: <i>On call</i> Very nearby: <i>On standby:2<sup>nd</sup> CEPOD, multiple shifts away from home</i> Other:
<b>Line manager</b> signature /contact		<b>Staff / Patient Name:</b>	
<b>WVT manager</b> signature /		<b>Staff Role</b>	
<b>Staff / patient contact details</b>	On call bleep:	<b>Work area/ Ward</b>	
	Work mobile:	<b>Date / Shift start time(s)</b>	
	Home Landline:	<b>Date / Shift finish time(s)</b>	
Personal Mobile:			
<b>WVT control &amp; command use</b> (circle) Authorisation type Appropriate vehicle Procurement code Confirmed allocation	Organisational priority	Eligible / Not Eligible Critical/ redeploy/ Routine Staff 4 x 4 /non-clinical 4 x 4 /Clinical 4 x 4 /Fire & Rescue/ Other- Budget Code: Job Number :	
<b>Pick up</b> Date Area/ Address Postcode		<b>Drop off at WVT</b> Date Area/ Address Postcode	
<b>Pick up</b> Date Area/ Address		<b>Drop off at WVT</b> Date Area/ Address Postcode	





<b>Adverse Weather Cell checklist</b>	<b>Tick on completion</b>
<b>INITIAL RESPONSE</b>	
<b>Activate Adverse Weather Cell</b>	
Allocate 1 x senior manager , 1 x band 7, 2 x admin	
Identify weather cell room and telephone ext. access to TV, internet	
Monitor information e.g.: environment agency, Met Office alerts, highways	
Commence incident log	
Print off documentation e.g.: request forms, journey schedules	
Raise Purchase Order Numbers to enable multi-agency billing	
Determine communication strategy to staff, patients, service users	
Determine authorisation arrangements of requests and feedback mechanisms	
Organise arrangements for the scheduling of transport and accommodation	
Maintain central record of all requests, allocations, exceptional redeployments, additional resources	
<b>Command and control arrangements</b>	
Forecast likely duration of severe weather effect	
Brief WVT Divisional Senior managers, Level 3 , level 4, communications, HR, estates	
Instruct senior staff regarding need to be available on site	
Brief CCG and NHS England e.g.: teleconference, Sitreps	
Determine ongoing senior manager and department briefing arrangements	
Complete 24 / 7 rota for the duration of the forecasted effect	
<b>CONSOLIDATION</b>	
<b>Corporate risk assessment immediate/24-48hr/ medium term/recovery</b>	
refer to WVT SEVERE WEATHER ACTIONS AND RESPONSIBILTIES MATRIX and determine level	
Identify critical risk impacts ( <i>Laboratories, pharmaceutical and food storage, utilities (water, electricity, water, IT servers, estates, supplies, resources, access and egress)</i> )	
Assess critical service/vulnerable patient's requirements re: acute/ maternity/community, home based care	
Determine priorities for patient discharge, transfer, appointments	
Activation of business continuity plans as relevant	
Determine priority staff , patients, services eligible to receive additional support arrangements	
Determine exceptional HR i.e.: redeployment , cancel study leave/ AL, emergency arrangements	
Consideration of further escalation i.e.: major incident management, TCG activation	
<b>Identify support services required for staff and patients e.g.:</b>	
<ul style="list-style-type: none"> <li>• <i>Local Authority Emergency Planners 01432 260850- Herefordshire 4 x 4 volunteers + welfare service</i></li> <li>• <i>Accommodation on / off site</i></li> <li>• <i>Private 4 x 4 ambulances</i></li> <li>• <i>Drive clearances – fire brigade</i></li> </ul>	
What skills are required of the support services	
DBS clearance, business insurance required?	
Determine whether to standby or activate services	
<b>Multiagency approach</b>	
Consider need to share and coordinate the support services across multiagency co-opt managers into the cell (LA Emergency Planners, 2gether Trust; Adult Social Care)	
Organise logistics e.g.: parking, Temporary ID, access to Wi-Fi, orientation	
<b>RECOVERY</b>	
Determine priority order for service recovery	
Identify and plan staff recovery arrangements	
Identify additional resource requirements e.g.: emergency surgery, rebooking OPAs, cleaning, estates management, restocking, invoice management,	
Determine communication strategy to stand-down i.e.: staff, services, multiagency,	
Sign off Incident logs and forward to Emergency Planning Officer	
Complete indicative financial impact report for Chief Operating Officer	
Determine if required and undertake debrief	
Inform EPO of any learning to further develop policy	

