



Brighton & Hove Cold Weather Plan 2021

Protecting Health and Reducing Harm During Winter

(To be read in conjunction with the Cold Weather Plan for England & supporting guidance)

This Cold Weather Plan is the overarching plan for the Brighton and Hove City Council and complements the Winter Plans produced by healthcare and partner agencies. This Plan helps prevent the major avoidable effects on health during periods of cold weather in England. The Cold Weather plan is compiled by public health with input from all BHCC Directorates. It describes the key issues for the city, cold weather alert system, related work-streams and governance arrangements.

It is over seen by the Brighton and Hove Health Protection & Screening Forum, that reports into the Integrated Care Partnership and the Health and Wellbeing Board via the Director of Public Health.

This Plan is based on the most recent Cold Weather Plan for England dated January 2019

Document Control

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Drafted by:	Becky Woodiwiss Public Health Principal and Barbara Hardcastle Public Health Specialist Public Health, Health & Adult Social Care Directorate, Brighton and Hove City Council and Brighton & Hove Clinical Commissioning Group
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Mandatory / Statutory guidance Requirements Winter guidance and advice	Civil Contingencies Act 2004 http://www.legislation.gov.uk/ukpga/2004/36/contents NHS EPRR Framework & associated guidance http://www.england.nhs.uk/ourwork/gov/epr/ Public Health England Cold Weather Plan for England http://www.gov.uk/phe/cold-weather-plan BHCC Covid19 Local Outbreak Plan https://new.brighton-hove.gov.uk/local-covid-19-outbreak-plan NHS Community Health guidance https://www.england.nhs.uk/coronavirus/ Annual seasonal influenza (flu) vaccination programme https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan Keep Warm Keep Well - NHS Choices (www.nhs.uk) https://www.gov.uk/government/publications/keep-warm-keep-well-leaflet-gives-advice-on-staying-healthy-in-cold-weather Met Office Weather Ready pages 'Are you ready for winter ?' https://www.metoffice.gov.uk/weather/warnings-and-advice/weatherready Excess winter deaths and morbidity and the health risks associated with cold homes https://www.nice.org.uk/guidance/ng6 Preventing excess winter deaths and illness associated with cold homes Quality standard [QS117] Published date: March 2016 https://www.nice.org.uk/guidance/qs117/chapter/Related-NICE-quality-standards Cutting the cost of keeping warm https://www.gov.uk/government/publications/cutting-the-cost-of-keeping-warm

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1. Introduction

1.1 Planning for winter 2021/2022

Planning for the Winter of 2021/22 is in the context of the COVID-19 pandemic, its health and socio-economic impacts, resulting services changes, and an expanded Seasonal Influenza Vaccination Programme.

The COVID-19 pandemic started in January 2020 and waves of infection have continued to occur since, however the vaccination programme has had an impact on reducing the number of deaths and hospital admissions¹. A [Local Outbreak Control Plan](#) is in place to prevent and manage any further outbreaks.

Throughout the response phase many service changes have been made to ensure service users and staff are safe. These changes have embedded over the spring and summer, so services are COVID-19 prepared for the winter demands.

The enhanced Flu Programme has expanded the eligible groups and targets to vaccinate, and it is hoped will reduce impact of seasonal Flu during winter.

1.2 Impact of cold weather

In recent previous years there have been significant periods of severe and sustained cold weather. This has highlighted the need to have effective plans in place to mitigate the effects of cold weather on health.

On average, there are around 25,000 excess winter deaths each year in England. Excess winter deaths (EWDs) are the observed total number of deaths in winter (December to March) compared to the average of the number of deaths over the rest of the year. 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 many of these winter deaths are indeed 'extra' and are related to cold temperatures and living in cold homes, respiratory illnesses, and cardiovascular conditions as well as infectious diseases such as influenza are the main causes of excess mortality in preceding years. This is predominantly in the older age groups, those with chronic illnesses and children, Heavy snow and ice has a small direct effect on health, predominantly as a result of falls and injuries. Additionally, it causes disruption to the delivery of health, social care and other services. In the recent past, the rate of winter deaths in England was twice the rate observed in some northern European countries, such as Finland.

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.

¹ <https://new.brighton-hove.gov.uk/covid-19-key-statistics-brighton-hove>

Living in a cold home has significant and demonstrable direct and indirect health impacts. There is strong evidence that shows it is associated with poor health outcomes and an increased risk of morbidity and mortality for all age groups. People live in cold homes often due to fuel poverty². A household is considered to be fuel poor if it has higher than typical energy costs and would be left with a disposable income below the poverty line. Fuel poverty is driven by 3 main factors: household income, high or unmanageable energy costs and the energy efficiency of a home.

1.3 COVID19 and the cold

Those at high risk of COVID19 infection, morbidity or mortality are similar population groups as those at greater risk from the ill health effects of cold weather (Fig 2.6). For COVID19, these are the over 70s, those with chronic health conditions especially respiratory and CVD, those clinically extremely vulnerable, pregnant women and people living in areas of higher deprivation and experiencing ongoing health and/ or socio-economic inequalities.

A combination of factors are likely to exacerbate the situation further over the colder months, the continued vulnerability of the population, and poorer weather, may mean that people spend more time in their homes, where transmission may be more likely. The socio-economic impacts will cause greater fuel poverty, should public spaces be closed again due to another lockdown it will reduce the warm places people can visit. If services continue to work from home fewer people will be visiting people homes, so there will be less opportunities to notice a home is cold, damp or hard to heat.

There are also small but relevant direct effects of the environmental conditions on the virus which persists for longer at lower temperatures either outdoors or in a cold and poorly ventilated home, and with lower UV levels.³ Changes in delivery of health, social care and other support services may also impact on health seeking behaviours adding to the risk for the very vulnerable. As part of the ongoing management of the COVID19 pandemic people will need to self-isolate in their homes for periods of time if they contract the infection or are a primary contact. Additional support will be needed for those with cold homes or who are living in fuel poverty.⁴

All services delivered in preparation for or in response to the cold weather will follow the COVID19 infection prevention and control guidance relevant for their service and appropriate for the recipient and community context.

1.4 The national Cold Weather Plan⁵

² Annual Fuel poverty statistics report 2021, The Department for Business, Energy and Industrial Strategy: <https://www.gov.uk/government/statistics/annual-fuel-poverty-statistics-report-2021> (accessed Sept 2021)

³ NERVTAG: Seasonality and its impact on COVID-19, 22 October 2020 Paper prepared by NERVTAG and EMG on seasonality and its impact on COVID-19. Updated: 6 November 2020

⁴ <https://www.nice.org.uk/guidance/NG6/chapter/1-recommendations> (accessed Sept 2021)

⁵ The CWP 2021 is not published at the time of writing

The Cold Weather Plan for England (CWP), published annually since 2011 aims to prevent avoidable harm to health, by alerting people to the negative health effects of cold weather and enabling them to prepare and respond appropriately.

The CWP also aims to reduce pressure on the health and social care system during winter through improved anticipatory actions with vulnerable people.

The EWD Index is excess winter deaths as a percentage increase of the expected deaths based on non-winter deaths.⁶ Local and national excess winter mortality is highly variable year on year and shows no clear trend. However, in the 2018 to 2019 winter period (December to March), there were an estimated 23,200 EWD in England and Wales and this was substantially lower than in most previous years.⁷ Excess winter deaths index for Brighton & Hove also showed a fall in 2018-19. There were 51 EWDs (7.4%) lower than England (15.1%) and the South East (14.3%). This was the third lowest EWD figure in the South East.

The Cold Weather Plan for England is at <https://www.gov.uk/government/collections/cold-weather-plan-for-england> this page contains links to the national plan, health risks of cold homes, a supporting 'making the case' document, and an easy-read summary document, action cards for all groups involved, 'Keep Warm Keep Well' leaflet and supporting guidance.

The National CWP acknowledges the roles of Local Authorities, Directors of Public Health, NHS England Regional Office, Clinical Commissioning Groups, Health and Wellbeing Boards (HWB's), NHS Trusts, GP's, Emergency Planning Officers, and others. The Department of Health and Social Care commissioned an independent evaluation of the CWP from the Policy Innovation Research Unit (PIRU) in 2012. The findings indicate that negative health effects start at relatively moderate outdoor temperatures of around 4-8°C. Although the risk of death increases as temperatures fall, the higher frequency of days at moderate temperatures means that the greatest health burden in absolute numbers of deaths, occurs at these moderate temperatures. This means that action to prevent excess winter morbidity and mortality should not be restricted to the very cold days, but should be carried out throughout the year tailoring solutions to protect the most vulnerable.

The Fuel Poverty Strategy for England (currently under review) emphasises the role the health and social care sector can play in tackling fuel poverty and sets targets up to 2030.⁸

1.5 Key messages for action

This Brighton and Hove Cold Weather Plan is a good practice guide and the actions denoted within it are illustrative. There are five key messages recommended to all local areas:

⁶

<https://fingertips.phe.org.uk/search/excess%20winter%20deaths#page/3/gid/1/pat/6/par/E12000008/ati/202/are/E06000043/iid/90360/age/1/sex/4/nn/nn-7-E06000043>

⁷

<https://fingertips.phe.org.uk/search/excess%20deaths#page/0/gid/1/pat/6/par/E12000008/ati/102/are/E06000036/iid/90360/age/1/sex/4/cat/-1/ctp/-1/cid/4/tbm/1/page-options/ovw-do-0>

⁸ <https://www.gov.uk/government/publications/cutting-the-cost-of-keeping-warm>

1. All local organisations should consider the Cold Weather Plan for England and satisfy themselves that the suggested actions and Cold Weather Alerts are understood across the system, and that local plans are adapted as appropriate to the local context.
2. City Council and NHS commissioners should satisfy themselves that the distribution of Cold Weather Alerts and the National Severe Weather Warning Service (NSWWS) which provides information on snow and ice, will reach those that need to take action.
3. City Council and NHS commissioners should satisfy themselves that providers and stakeholders will take appropriate action according to the Cold Weather Alert level in place, their professional judgements and remain COVID-19 safe.
4. Opportunities should be taken for closer partnership working with the voluntary and community sector to help reduce vulnerability and to support the planning and response to cold weather.
5. Long-term planning and commissioning to reduce cold-related harm both within and outside the home is considered core business by health and wellbeing boards and should be included in joint strategic needs assessments⁹ and B&H Joint Health and Wellbeing Strategy 2019-2030.¹⁰

2. Aim

- 2.1 The aim of this plan is to set out the procedures and work-streams to be implemented within Brighton and Hove City Council, the local health economy (LHE) and with key city partners in support of the National Cold Weather Plan for England.

3. Objectives

- 3.1 The objectives of this plan are to:

- To define the partners engaged with the implementation of this Plan
- To ensure the requirements of the National Plan are complied with locally, by clearly stating the work-streams agreed to be relevant and those partners engaged in their delivery.
- To set out the coordination and oversight / assurance arrangements in support of the Plan.
- To understand and mitigate, as far as possible, the impact of cold weather on the community and those most vulnerable to cold weather.
- To safely deliver this Plan in the context of COVID19 guidance.
- To support those self-isolating as a result of COVID-19 illness or Test and Trace Service instructions to keep well and warm at home.
- To review any implications for this Plan of the EU exit such as staffing and access to relevant supplies.

⁹ <http://www.bhconnected.org.uk/sites/bhconnected/files/6.4.2%20Fuel%20poverty%20FINAL.pdf>

¹⁰ <https://www.brighton-hove.gov.uk/sites/default/files/health/brighton-hove-health-wellbeing-strategy-2019-2030-26-july-19.pdf>

4. Planning implications for Brighton & Hove

The Plan is linked to a system of cold weather alerts – generated by the [Cold weather health watch system](#) developed by the [Meteorological Office](#) including the ‘National Severe Weather Warning Service’ (NSWWS). This comprises five levels of response based on cold weather thresholds. The thresholds have been developed to trigger an alert when severe cold weather is likely to significantly affect people's health and they also take account of temperature along with other winter weather threats such as ice and snow.

The Cold Weather Watch system operates in England from 1st November to 31th March every year, in association with [UK Health Security Agency](#) (UKHSA) and [Office for Health Improvement and Disparities](#). (OHID) However, should thresholds for an alert be reached outside of this period, an extraordinary heat-health alert will be issued and stakeholders are advised to take the usual public health actions. The alerts take account of temperature along with other winter weather threats such as widespread ice¹¹ and heavy snow¹².

¹¹ **Widespread ice** – Ice forms when rain falls on surfaces at or below zero; or already wet surfaces fall to or below zero. The ice is usually clear and difficult to distinguish from a wet surface. The term “widespread” indicates that icy surfaces will be found extensively over the area defined by the Met Office in the alert

¹² **Heavy snow** – Snow that is expected to fall for at least two hours. Geographic extent is not considered, and sometimes the event can be quite localised

The levels are set out in the table below:

Level 0	Year round 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 (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.)
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 (4-8°C depending on region) and there are normally many more days at these temperatures each winter.
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
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, with snow and ice, and an impact on health services is expected A NSWWS warning is highly likely to have been issued as well
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.

Figure 1 Cold Weather Plan Alert Levels

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)

4.1 Level 0 - underpinning planning requirements

- Strong local leadership and partnership working at all levels across sectors and is vital to tackle the range of causes and reduce the number of “excess” deaths that are observed each winter.
- Long term strategic planning and commissioning to reduce cold-related harm. This is considered core business by Health and Wellbeing Boards (HWBs) and joint strategic needs assessments (JSNAs), as evidenced by the linking of these arrangements to the Public Health led Health Protection & Screening Forum and HWB.
- To alert all City stakeholders to the availability of the action cards¹³ for:
 - ✓ Commissioners in the Local Authority and the NHS Sussex Brighton & Hove Clinical Commissioning Group (CCG)
 - ✓ Frontline Health & Social Care staff in community & care facilities
 - ✓ GP’s & Practice Staff and Community Pharmacies
 - ✓ Community & Voluntary Sector organisations
 - ✓ Provider Organisations
 - ✓ Other relevant organisations in the city
 - ✓ Individuals.
- To ensure there is a link to the City’s Vulnerable People Plan and other Emergency Planning Resilience and Response plans.
- The Public Health Outcomes Framework includes indicators to reduce excess winter deaths¹⁴ and address fuel poverty¹⁵
- Working with partners to ensure that a strategic approach to the reduction of EWDs and fuel poverty . In particular:
 - ✓ To develop a shared understanding of EWD’s and what partners can do to reduce them.
 - ✓ To identify those most at risk from seasonal variations.
 - ✓ To improve winter resilience of those at risk via a locally annually agreed programme.
 - ✓ To ensure a local, joined-up programme is in place to support improved housing, heating and insulation, including uptake of energy-efficient, low-carbon solutions.
 - ✓ To achieve a reduction in carbon emissions and assess the implications of climate change.

¹³ Action Cards are available here <https://www.gov.uk/government/publications/cold-weather-plan-action-cards-for-cold-weather-alert-service>

¹⁴

<https://fingertips.phe.org.uk/search/excess%20deaths#page/0/gid/1/pat/6/par/E12000008/ati/102/are/E06000036/iid/90360/age/1/sex/4/cat/-1/ctp/-1/cid/4/tbm/1/page-options/ovw-do-0>

¹⁵

<https://fingertips.phe.org.uk/search/fuel%20poverty#page/0/gid/1/pat/6/par/E12000008/ati/302/are/E06000043/cid/4/tbm/1/page-options/ovw-do-0>

- ✓ Work with Communities Equalities and Third sector Team at BHCC to widen reach to vulnerable communities and population groups in the city
- To consider how cold weather and winter plans can help to reduce health inequalities, target high-risk groups and address the wider determinants of health.
- To ensure that organisations and staff are prompted to signpost vulnerable clients onwards (e.g. for energy efficiency measures, benefits or related advice).
- To work with partners and staff on risk reduction awareness, information and education including vaccinations.
- To engage with local CVS organisations for planning and implementation of all stages of the Plan.
- Agreement that B&H communications and media messages will be jointly coordinated by BHCC and CCG comms teams.
- Annual Flu campaign to support the vaccination uptake across all eligible groups and to the wider population

5. *Actions for the alert levels*

The table on the next page sets out the expected minimum actions for each of the alert levels for a range of stakeholders and the public:

Summary cold weather actions for health and social care organisations and professionals, communities and individuals

	Level 0	Level 1	Level 2	Level 3	Level 4
	Year-round planning All Year	Winter preparedness and action 1 November to 31 March	Severe winter weather forecast – Alert and readiness Mean temperatures of 2°C and/or widespread ice and heavy snow predicted with 60% confidence	Severe weather action Mean temperatures of 2°C and/or widespread ice and heavy snow	Major incident – Emergency response
Commissioners of health and social care	1) Take strategic approach to reduction of EWDs and fuel poverty. 2) Ensure winter plans reduce health inequalities. 3) Work with partners and staff on risk reduction awareness (eg Flu and Covid19 vaccinations, signposting for winter warmth initiatives).	1) Communicate alerts, messages and other relevant information and materials to staff/public/media. 2) Ensure partners are aware of alert system and actions. 3) Identify which organisations are most vulnerable to cold weather and agree winter surge plans.	1) Continue level 1 actions. 2) Ensure partners can access advice and make best use of available capacity. 3) Activate business continuity arrangements as required.	1) Continue level 2 actions. 2) Ensure key partners are taking appropriate action. 3) Work with partners to ensure access to critical services.	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.
Provider organisations	1) Ensure organisation can identify and support most vulnerable. 2) Plan for joined up support with partner organisations. 3) Work with partners and staff on risk reduction awareness (eg Flu and Covid19 vaccinations, signposting for winter warmth initiatives).	1) Ensure cold weather alerts are going to right staff and actions agreed and implemented. 2) Ensure staff in all settings are considering room temperature. 3) Ensure data sharing and referral arrangements in place. 4) Communicate alerts, messages and other relevant information and materials to staff and services users	1) Continue level 1 actions. 2) Ensure carers receiving support and advice. 3) Activate business continuity arrangements as required; plan for surge in demand.	1) Continue level 2. 2) Implement emergency and business continuity plans; expect surge in demand in near future. 3) Implement local plans to ensure vulnerable people contacted.	All level 3 responsibilities to be maintained unless advised to the contrary.

Summary cold weather actions for health and social care organisations and professionals, communities and individuals

<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Frontline staff – care facilities and community</p>	<ol style="list-style-type: none"> 1) Use patient contact to identify vulnerable people and advise of cold weather actions; be aware of referral mechanisms for winter warmth and data sharing procedures. 2) Ensure awareness of health effects of cold and how to spot symptoms. 3) Encourage colleagues/clients to have Flu and Covid19 vaccinations. 	<ol style="list-style-type: none"> 1) Identify vulnerable clients on caseload; ensure care plans incorporate cold risk reduction. 2) Check room temperatures and ensure referral as appropriate. 3) Signpost clients to other services using 'Keep Warm Keep Well' booklet and other relevant information and materials . 4) Communicate alerts, messages and other relevant information and materials to staff and services users 	<ol style="list-style-type: none"> 1) Continue level 1 actions. 2) Consider prioritising those most vulnerable and provide advice as appropriate. 3) Check room temperatures and ensure urgent referral as appropriate. 	<ol style="list-style-type: none"> 1) Continue level 2 actions. 2) Implement emergency and business continuity plans; expect surge in demand in near future. 3) Prioritise those most vulnerable. 	
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">GPs and their staff</p>	<ol style="list-style-type: none"> 1) Be aware of emergency planning measures relevant to general practice. 2) Ensure staff aware of local services to improve warmth in the home including the identification of vulnerable individuals. 3) Signpost appropriate patients to other services when they present for other reasons. 	<ol style="list-style-type: none"> 1) Consider using a cold weather scenario as a table top exercise to test business continuity arrangements. 2) Be aware of systems to refer patients to appropriate services from other agencies. 3) When making home visits, be aware of the room temperature. 4) Share comms and campaign materials to staff and patients 	<ol style="list-style-type: none"> 1) Continue level 1 actions. 2) Take advantage of clinical contacts to reinforce public health messages about cold weather and cold homes on health. 3) When prioritising visits, consider vulnerability to cold as a factor in decision making. 	<ol style="list-style-type: none"> 1) Continue level 2 actions. 2) Expect surge in demand near future. 3) Ensure staff aware of cold weather risks and can advise appropriately. 	

Summary cold weather actions for health and social care organisations and professionals, communities and individuals

	Level 0	Level 1	Level 2	Level 3	Level 4
Community and voluntary sector	<ol style="list-style-type: none"> 1) Engage with local statutory partners to agree how VCS can contribute to local community resilience arrangements. 2) Ensure VCS organisations can identify and support their most vulnerable groups members and service users 3) Develop a community emergency plan to identify and support vulnerable neighbours. 4) Agree arrangements with other community groups to maximize service for and contact with vulnerable people. 5) Share general winter comms and campaign materials through community networks 	<ol style="list-style-type: none"> 1) Test community emergency plans to ensure that roles, responsibilities and actions are clear. 2) Set up rotas of volunteers to keep the community safe in cold weather and check on vulnerable people. 3) Actively engage with vulnerable people and support them to seek help. 4) Communicate alerts, messages and other relevant information and materials to VCS organisations and service users and to be shared onwards through community networks 	<ol style="list-style-type: none"> 1) Activate the community emergency plan. 2) Activate the business continuity plan. 3) Continue to actively engage vulnerable people known to be at risk and check on welfare regularly. 	<ol style="list-style-type: none"> 1) Continue level 2 actions. 2) Ensure volunteers are appropriately supported. 3) Contact vulnerable people to ensure they are safe and well and support them to seek help if necessary. 	<p>Level 4 alert issued at national level in light of cross-government assessment of the weather conditions, co-ordinated by the Civil Contingencies Secretariat (CCS) based in the Cabinet Office.</p> <p>All level 3 responsibilities to be maintained unless advised to the contrary.</p>
National level	<ol style="list-style-type: none"> 1) CO will lead on co-ordinating cross-government work; individual government departments will work with partners on winter preparations. 2) DHSC, UKHSA¹⁶ and NHS England will look to improve the CWP and the monitoring and analysis of winter-related illness and deaths. 3) UKHSA/OHID¹⁷ and NHS England will issue general advice to the public and professionals and work closely with other government departments and other national organisations that produce winter warmth advice. 	<ol style="list-style-type: none"> 1) Cold Weather Alerts will be sent by the Met Office to the agreed list of organisations and Category 1 responders. 2) UKHSA/OHID and NHS England will make advice available to the public and professionals. 3) NHS England will continue to hold health services to account for action and UKHSA will routinely monitor syndromic, influenza, norovirus and mortality surveillance data. 	<ol style="list-style-type: none"> 1) Continue level 1 actions. 2) DHSC will ensure that other government departments, particularly MHCLG RED, are aware of the change in alert level and brief ministers as appropriate. 3) Government departments should cascade the information through their own partner networks and frontline communication systems. 	<ol style="list-style-type: none"> 1) Continue level 2 actions. 2) NHS England will muster mutual aid when requested by local services. 3) Met Office will continue to monitor and forecast temperatures in each area, including the probability of other regions exceeding the level 3 threshold. 	

Summary cold weather actions for health and social care organisations and professionals, communities and individuals

Individuals	<ol style="list-style-type: none"> 1) Seek good advice about improving the energy efficiency of your home and staying warm in winter; have all gas, solid fuel and oil burning appliances serviced by an appropriately registered engineer. 2) Check your entitlements and benefits; seek income maximisation advice and other services. 3) Get Flu and Covid19 vaccinations. 	<ol style="list-style-type: none"> 1) If you are receiving social care or health services ask your GP, key worker or other contact about staying healthy in winter and services available to you. 2) Seek help from local community groups and networks to help you remain safe and well. 3) Check room temperatures – especially those rooms where disabled or vulnerable people spend most of their time 4) Look out for vulnerable neighbours and help them prepare for winter. 	<ol style="list-style-type: none"> 1) Continue to have regular contact with vulnerable people and neighbours you know to be at risk in cold weather. 2) Stay tuned into the weather forecast ensure you are stocked with food and medications in advance. 3) Take the weather into account when planning your activity over the following days. 	<ol style="list-style-type: none"> 1) Continue level 2 actions. 2) Dress warmly; take warm food drinks regularly; keep active. If you have to go out, take appropriate precautions. 3) Check on those you know are at risk. 	<p>Follow key public health and weather alert messages as broadcast on the media.</p>
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Figure 2 Summary cold weather actions for health and social care organisations and professionals, communities and individuals

¹⁶ Oct 2021 Replacement for Public Health England UKHSA = UK Health Security Agency

¹⁷ Oct 2021 Replacement for Public Health England OHID = Office for Health Improvement and Disparities.

6. Indoor room temperatures

Recommended indoor temperatures for homes in winter

Heating homes to at least 18°C (65F) in winter poses minimal risk to the health of a sedentary person, wearing suitable clothing.

Daytime recommendations:

- the 18°C (65F) threshold is particularly important for people **65 years and over or with pre-existing medical conditions**; having temperatures slightly above this threshold may be beneficial for health
- the 18°C (65F) threshold also applies to **healthy people (1 –to 64 years)***; if they are wearing appropriate clothing and are active, they may wish to heat their homes to slightly less than 18°C (65F)

Overnight recommendations

- maintaining the 18°C (65F) threshold overnight may be beneficial to protect the health of those **65 years and over or with pre-existing medical conditions**; they should continue to use sufficient bedding, clothing and thermal blankets, or heating aids as appropriate
- overnight, the 18°C (65F) threshold may be less important for **healthy people (1 to 64)*** if they have sufficient bedding, clothing and use thermal blankets or heating aids as appropriate

*There is an **existing recommendation** to reduce sudden infant death syndrome (SIDS). Advice is that rooms in which infants sleep should be heated to between 16 to 20°C (61 to 68F)

Figure 3 Indoor room temperatures

7. Risk of Cold Weather (governance and assurance) at B&H

- 7.1 The health, social, economic and environmental risks associated with a spell of severe cold weather have been assessed by the Sussex Local Resilience Forum (SRF) (Ref H18) and included on the Sussex Community Risk Register. Information regarding the risk of severe weather can be found on the Sussex Local Resilience Forum website <https://www.sussex.police.uk/SysSiteAssets/media/downloads/sussex/about-us/sussex-resilience-forum/srf-community-information-on-risks-in-sussex.pdf>
- 7.2 It is the responsibility of the NHS England South (South-East) and for Sussex DsPH to engage with providers and multi-agency partners via the Local Health Resilience Partnership, (LHRP), a body linked to the SRF to assess risks and to ensure plans are in place to protect the communities of Sussex from health-related vulnerabilities.

- 7.3 The following partners have been consulted to produce this updated Plan, all of whom are aware of their responsibilities and have their own organisational plans.
- 7.4 Oversight of these arrangements will be provided by the Brighton and Hove Health Protection & Screening Forum, which reports to the Health & Wellbeing Board, in line with the National Cold Weather plan.
- 7.5 All partners must ensure that staff with an active part to play in the cold weather response need to be aware of the CWP and any training needed for its requirements and implementation.

8. ***Cascading Cold Weather Level Alerts***

8.1 The Level will be publicly displayed on the Metrological office website at <http://www.metoffice.gov.uk/health/professionals/cold-weather-alerts>

8.2 Local cascade arrangements within B&H

- The BHCC Emergency Planning & Resilience Team forward alerts to all internal BHCC department nominated leads;
 - Health & Adult Social Care – work with vulnerable adults
 - Families, Children & Learning – work with vulnerable children and families
 - Housing Neighbourhoods and Communities – work with vulnerable communities and neighbourhoods
 - Economy, Environment and Culture – work with local businesses and transport and the urban environment
 - Strategy, Governance and Law – for Communications team
- BHCC EPRR also send to;
 - External partners locally including the Community and Voluntary sector
 - ‘Community Resilience’ contacts that request the service.
- BHCC Adult Social Care (ASC) have provided assurance that they will inform ALL B&H care & residential homes and home care providers
- Brighton and Hove CCG (having delegated authority for Primary Care Commissioning), inform city GP Surgeries via a process agreed with the CCG Primary Care Team.
- The CCG Resilience lead disseminates alerts to CCG staff (on-call managers, agreed primary care staff and Communications), and to IC24 (Out Of Hour’s provider), and to Sussex Partnership Foundation Trust, (SPFT) and to the British Red Cross.
- All category 1 providers (including SCFT / University Hospital Sussex Trust / SECamb etc) also receive alerts direct from the Met Office.

It is therefore confirmed that systems are in place to ensure that all who need to receive cold weather alerts are doing so within the city.

9. At-risk groups

These include examples of sub-categories, as well as living conditions and health conditions which may place people at risk to the potential of their vulnerability in relation to the cold weather. (See figure 4 below).

Brighton & Hove has an old housing stock with 66% of houses built before 1945 (compared with 43% across England) and many private sector properties labelled 'hard to treat' (for example those with solid walls) in relation to energy efficiency measures. Brighton and Hove has an estimated 11.3% of households living in fuel poverty, equating to 14,575 households. This is higher than both the South East (7.9%) and England (10.3%)¹⁸.

Groups at greater risk of harm from cold weather (as defined by the national CWP) are detailed in fig 4 below. (It is recognised that the NICE guidance refers to 65+).

- older people (in particular those over 75 years old, otherwise frail, and or socially isolated)
- 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)
- pregnant women (in view of potential impact of cold on foetus)
- children under the age of five
- people with learning disabilities
- 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
- homeless or people sleeping rough
- other marginalised or socially isolated individuals or groups

Figure 4 those at greater risk of harm from cold weather

¹⁸ <https://fingertips.phe.org.uk/search/fuel%20poverty#page/0/gid/1/pat/6/ati/102/are/E06000043/iid/90356/age/-1/sex/-1/cat/-1/ctp/-1/cid/4/tbm/1>

It is important that all services across all sectors identify those at greatest risk this winter, taking into account intersecting risks. Ask about living in a cold home, and support vulnerable individuals to access existing resources to keep warm. For example, people with COVID-19 or those who have been asked to self-isolate by the NHS Test & Trace service will be isolating in their own homes. If they have cold homes or are fuel poor and cannot heat their homes adequately, they may be at increased risk of the negative health effects of the cold weather. This may exacerbate their illness especially if the home is damp. It may also reduce compliance with self-isolation guidance from the Test & Trace service.

The Local Outbreak Plan identifies the Community Hub as route by which people who are self-isolating can get practical support if it is needed.

People being discharged from hospital or in-patient care may be at increased risk of the cold if their home was left empty and / or unheated. All discharge, rehabilitation and reablement plans consider home circumstances. People are only discharged if they are considered to be well enough for self-care. Cold homes and fuel poverty may not be an obvious consideration however from this year most services include questions about ability to heat the home. Further links and contact details should be made explicit for support with cold homes and fuel poverty given the impact on health and recuperation especially for older people and those with respiratory or CVD conditions.

10. Covid Winter Plan

The Government released their Covid Winter Plan which recognises that winter is always a challenging time for the NHS and all sector care services. This winter could be particularly difficult due to the impacts of COVID-19 on top of the usual increase in emergency demand and seasonal respiratory diseases such as influenza (Flu). It is a realistic possibility that the impact of Flu (and other seasonal viruses) may be greater this winter than in a normal winter due to very low levels of Flu over winter 2020-21¹⁹. There is considerable uncertainty over how these pressures will interact with the impact of COVID-19. Contingency planning will be ongoing with close monitoring and review of the data, epidemiology and the science.²⁰

The Plan includes two scenarios depending on the levels of Covid in circulation, numbers in hospital, in critical care and consider wider social impacts.

There will be ongoing work with the Local Contain Frameworks additional support to areas with high number of cases and numbers in hospital; continuing health protection regulations; advising people on how to protect themselves and others with clear guidance and communication. Further developments in treatment and care with advances in antivirals and therapeutics for those with Covid, including long covid will also be supported centrally.

¹⁹ <https://acmedsci.ac.uk/file-download/4747802>

²⁰ <https://www.gov.uk/government/publications/covid-19-response-autumn-and-winter-plan-2021>

Plan A

- Vaccination: Ongoing offer to un(der)-vaccinated; booster for Groups 1-9; single dose for 12-15 year olds (See detail at 12.15)
- Test, Trace, Isolate and Support to limit transmission: Local Authorities continuing to support enhanced Community Testing; local case tracing; managing self isolation support payments
- Support for health and care: Build Back Better Plan with funding to support managing pressures and recovering services; Flu vaccination (see detail at 12.14); Long Covid NHS services; mandatory care staff vaccination (CQC settings)
- Advice: Get vaccinated; let air in; use masks; test and isolate; stay at home if unwell; wash hands; use the app.
- Businesses: Working Safely / H&S approach; consider using NHS Covid pass
- International: Vaccinate the world and manage risk at the borders

Plan B (based on NHS pressures)

- Enhanced communications to the public reflecting increased risk
- Vaccine passport using NHS App: mandatory for nightclubs, crowded venues 500+, crowded outside events 4,000+, all events 10,000+.
- Masks mandated (settings tbc)
- Work from home advice
- Further stringent restrictions, although considered unlikely, may follow pending severity of the situation.

This Cold Weather Plan has been provided to the partners listed for consultation, amendment and agreement. An update on issues linked to winter preparedness for 2021/22 as follows below.

10.1 Covid 19 Cold weather Care Home settings

Care settings managers should remind staff about the following:

- To follow hand hygiene guidance see [Info sheet G Hand Hygiene](#)
- Type IIR masks are still recommended for the delivery of social care (in the absence of Type II) in line with local NHS recommendations
- Staff should follow the PPE guidance for mask changing [Personal protective equipment: resource for care workers working in care homes during sustained COVID-19 transmission in England - GOV.UK \(www.gov.uk\)](#)
- For winter the minimum acceptable living environment temperature is 18c – the HSE advice is to maintain a warm temperature at same time as keeping rooms ventilated e.g. adjusting indoor heating if windows are open to ventilate spaces; opening windows at higher level to reduce draught effect.
- Ventilation is even more important in absence of natural sunlight as the virus will survive longer.
- Air conditioning units can be used, but they must bring air in from the outside, not recirculate the room air. They need to be maintained following manufactures guidance, ensuring they are cleaned regularly including emptying the capture tray/tank if present.

- Flu vaccination for all staff and residents should be strongly encouraged; there is growing evidence of poorer outcomes for those with Influenza and Covid-19 co-infection
- COVID-19 PCR and LFT tests and reagents need be stored in accordance with the manufacturer's instructions.
 - PCR tests use various types of transport medium, however if there is prolonged exposure to elevated temperatures outside the range they should be stored at, it could reduce their shelf life, packaging integrity, discolouration, pH shift and degradation of physical characteristic, which affects the efficacies of the test
 - for Innova Lateral Flow Devices the test cartridge and extraction solution must be stored at ambient temperature (2-30°C). The reagents and devices must be at room temperature 15-30°C when used for testing
 - the tube and cap can behave differently, leading to leakage of the medium, and the torque (screw part) on the tube decreases
 - if the kits have been stored at elevated temperature, there is a risk of inaccurate results.

Risk assessment must be undertaken to identify the hazards and risks associated with elevated storage temperature, consider regular temperature monitoring and control will be necessary to ensure this and frequency of monitoring should be based on a local risk assessment.

11. Seasonal Vaccination Programmes

Flu is a respiratory illness and COVID-19 is primarily a respiratory illness. There are strong similarities between the two - those at higher risk of acquiring it, side effects and subsequent complications, and mortality.

11.1 Influenza vaccination programme 2021/22

This year the national Flu programme has extended uptake targets, expanded groups eligible for the vaccination and widened delivery routes in response to the additional infection prevention measures needed for COVID-19.²¹

There are imminent plans to establish for winter 2021/22 a joint Flu and Covid-19 NHS Sussex Programme Board with a range of Task and Finish groups focussing on key aspects such as; health & social care staff, primary care, outbreak arrangements, vaccine supply, data, communications, health promotion and prevention. Locally, the city's multi-sector Flu Planning meeting co-ordinates implementation across organisations in support of the Flu prevention plan.

Due to the Covid prevention measures of mask wearing, social distancing and lockdowns, the amount of Flu circulating in 2020 was very low. It is thought that as society has opened-up again there is a high likelihood that the 2021-22 Flu season could be up to 50% larger than typically seen. It could also coincide with Covid 19

²¹ <https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan>

outbreaks, placing additional pressure on the NHS.²²

Traditionally uptake of the Flu vaccine has been consistently lower than the SE and England average for all eligible groups with the exception of the schools programme which achieves 67% uptake.²³

This is supported by a major new public facing marketing campaign to encourage take up amongst eligible groups for the free Flu vaccine, and a targeted campaign for front-line health and social care workers. Resources will be available to from the OHID Campaign Resource Centre at: <https://campaignresources.phe.gov.uk/resources/> Vaccinations are available to those not in the target groups through pharmacies at a low cost (£8-£15)

Free Flu vaccinations are available for:

- all children aged 2 to 15 (but not 16 years or older) on 31 August 2021
- those aged 6 months to under 50 years in clinical risk groups
- pregnant women
- those aged 50 years and over
- those in long-stay residential care homes
- carers
- close contacts of immunocompromised individuals
- frontline health and social care staff including:
 - a registered residential care or nursing home
 - registered domiciliary care provider
 - a voluntary managed hospice provider
 - Direct Payment (personal budgets) and/or Personal Health Budgets, such as Personal Assistants.
 - Learning from the Covid19 vaccination programme as revealed a range of workforce who are day-to-day directly delivering health and social care to vulnerable residents and these groups will be considering as within this Flu programme. Examples include special school staff giving PEG feeds²⁴ to children; social care workers in supported living hostels.
- At the Brighton and Hove level additional groups are being considered as clinically vulnerable such as homeless and rough sleepers, regular services users of the Alcohol and Substance misuse services.
- BHCC have an annual scheme with pharmacies for its staff to have the Flu vaccinations for those that are not eligible for the free NHS vaccinations.

Uptake ambitions - at least 75% for all groups this year with 100% for all groups of health and social care workers.

²² [National flu immunisation programme 2021 to 2022 letter - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/national-flu-immunisation-programme-2021-to-2022-letter)

²³ [https://fingertips.phe.org.uk/profile/public-health-outcomes-](https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/0/qid/1000043/pat/6/par/E12000008/ati/302/are/E06000043/cid/4/page-options/oww-do-0)

[framework/data#page/0/qid/1000043/pat/6/par/E12000008/ati/302/are/E06000043/cid/4/page-options/oww-do-0](https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/0/qid/1000043/pat/6/par/E12000008/ati/302/are/E06000043/cid/4/page-options/oww-do-0)

²⁴ <https://patient.info/treatment-medication/peg-feeding-tubes>

The vaccinations need to be delivered in line with infection prevention COVID-19 guidance.

Flu immunisation of frontline health and social care staff

As set out above, the main care providers are expected to deliver a significant improvement in staff vaccination rates this year moving towards a compliance rate of 100%. Having staff vaccinated reduces their own vulnerability, increases the resilience of the provider, and reduces the threat of transmission to patients. Staff vaccination programmes are in place across local provider organisations. Although uptake will be monitored by NHS England and UKHSA, local providers' coverage will be monitored via the Flu Planning Group, Covid19 Place-based Vaccination Cell Sussex COVID19 Programme Board, Brighton & Hove Immunisation Programme, Board A&E Delivery Board, at Quality Review Group meetings with providers and by the CCG's Executive Management Team.

BHCC and the CCG are actively encouraging all front line health, social care,²⁵ residential and Care Homes to vaccinate their residents and these are free of charge

Community pharmacies will be able to vaccinate all residents and staff in care settings as part of the NHS programme.

11.2 Covid-19 Vaccination programme

At the time of writing some of the further delivery details for the Covid-19 vaccination programme are being finalised.^{26 27}

It covers;

- Mandatory covid19 vaccinations for all those working in care home
- continuing roll out the first and second doses for those 16+ who have not yet been vaccinated with enhanced efforts to improve uptake in those areas and populations with lowest uptake
- vaccinating 12-15 year school children, prioritising the clinically extremely vulnerable
- delivering a third dose (booster) in a phased approach to those in cohorts 1-9 starting in October with
 - those living in residential care homes for older adults
 - frontline health and social care workers
 - all those aged 16 to 49 years with underlying health conditions that put them at higher risk of severe COVID-19, and adult carers
 - adult household contacts of immunosuppressed individuals

²⁵ health and social care staff, employed by a registered residential care/nursing home or registered domiciliary care provider, who are directly involved in the care of vulnerable patients/clients who are at increased risk from exposure to influenza.

• health and care staff, employed by a voluntary managed hospice provider, who are directly involved in the care of vulnerable patients/clients who are at increased risk from exposure to influenza.

• health and social care workers employed through Direct Payments (personal budgets) and/or Personal Health Budgets, such as Personal Assistants, to deliver domiciliary care to patients and service users.

²⁶ <https://www.nhs.uk/conditions/coronavirus-covid-19/coronavirus-vaccination/>

²⁷ <https://www.sussexhealthandcare.uk/keepsussexsafe/sussex-covid-19-vaccination-programme/>

- from November to all adults aged 50 years or over

12 Arrangements in local providers

These sections provide a short overview of the arrangements that are in place. The following text has been provided by the services.

12.1 BHCC Health and Adult Social Care

Public Health - Reduction of excess winter deaths and fuel poverty are Public Health (PH) priorities as highlighted in the Public Health Outcomes Framework.

Public Health and Housing co-chair a cross-sector, multi-agency Fuel Poverty and Affordable Warmth Steering Group, which meets quarterly to oversee delivery of the Fuel Poverty and Affordable Warmth Strategy 2016-2020. During the COVID-19 pandemic, key partners have met virtually with increased frequency to share information and coordinate support to households struggling to pay energy bills. Public Health have ensured links between this group and the Welfare Support and Financial Assistance Group. The overarching aims of the Fuel Poverty & Affordable Warmth Steering Group are to:

- Reduce preventable excess winter death rates
- Improve health and wellbeing among vulnerable groups
- Reduce pressure on health and social care services
- Reduce fuel poverty and the risk of fuel debt or being disconnected from gas and electricity supplies
- Improve the energy efficiency of homes.

The steering group will also consider additional issues for those who are self-isolating due to COVID-19 and ensure relevant connections with the Community Hub and other local initiatives as appropriate.

Building on previous successful partnership work and in collaboration with the steering group, initiatives to support at-risk groups during the winter months and beyond will be commissioned by Public Health. The Warmth For Wellbeing programme focusses on reaching marginalised and isolated communities, to identify and engage with those who are at elevated health risk due to living in fuel poverty and/or a cold home and reduce the health impacts through;

- Information and advice
- Home visits and assessments in line with COVID-19 guidance
- Provision of small measures
- Debt & benefits advice and casework
- Small hardship grants

Citizens Advice charities across Sussex have partnered with Your Energy Sussex, the local energy supplier backed by councils from across Sussex, to offer fuel vouchers to vulnerable households struggling to pay their fuel bills. Eligible householders can apply to their local Citizens Advice for multiples (up to 3) of a £49 voucher for a family and £28 voucher for a single occupier. Funding is limited and additional sources of funding are being explored to widen and extend this support. This scheme will end later this year when available funds are depleted.

Adult Social Care - Both Domiciliary and bed-based services are delivered by the Directorate, which has well-rehearsed Business Continuity Plans and heightened infection prevention and control measures in response to the COVID-19 pandemic. Independence at Home have service level agreements with both the Seafront Team and City Parks at BHCC, who will assist where possible with 4x4 vehicles and drivers in bad weather i.e. snow. Services and organisations across health and social care work closely together. Each service has a process in place which identifies level of need, the number of visits required and in what time scales. This assists in identifying and prioritising community visits at times of high demand / limited resources / extreme weather conditions. All services delivered are considered in light of the COVID-19 guidance.

Flu vaccination is actively encouraged in all provider and commissioned services as staff are eligible under the National Flu Programme. All HASC front line social care delivery staff are actively encouraged to visit their general practice or local pharmacies for Flu vaccinations.

The ASC team also maintains links with independent Care Homes (including Nursing Homes), and Home Care providers in the City.

A range of resources are distributed through ASC networks for example Helping to prevent winter deaths and illnesses associated with cold homes; A quick guide for home care managers ²⁸ [Advice to Care Homes Guidance on Outbreaks of Influenza in Care Homes](#), promotion of the pneumococcal vaccination and norovirus prevention.

Cold weather information is routinely be shared widely across the city through these general contacts.

Access.Point@brighton-hove.gov.uk and / or Contracts Unit Admin Team

ContractsUnit.AdminTeam@brighton-hove.gov.uk

Control.Carelink@brighton-hove.gov.uk carelinkplus@brighton-hove.gov.uk

The [Adult social care: our COVID-19 winter plan 2020 to 2021](#) sets out national support available for the social care sector for winter 2020 to 2021, as well as the main actions to take for local authorities, NHS organisations, and social care providers, including in the voluntary and community sector. Examples include arrangements for safely reopening day services or respite services; support the wider PPE needs of the sector, rolling out further testing, visiting guidance and additional funding for infection prevention and control.

²⁸ <https://www.nice.org.uk/about/nice-communities/social-care/quick-guides/helping-to-prevent-winter-deaths-and-illnesses-associated-with-cold-homes>

BHCC Health and Adult Social Care commission the 'Severe Weather Emergency Protocol' (SWEP). This activates when the temperature feels like 0 degrees for 1 night, (SWEP will also open where possible on an Amber weather warning). The [SWEP service](#) offers overnight shelter to rough sleepers. Community and third sector organisations working with rough sleepers within the city are involved in ensuring that rough sleepers are informed when the service is open and how to access. The service is open to all rough sleepers regardless of local connection.

This service is normally offered in shared sleep environments and we are in planning stages to look at how we deliver the service this winter to ensure the safety and wellbeing of rough sleepers whilst COVID-19 remains a real risk. We will be sharing plans as they are developed.

An annual plan is agreed with the NHS to support the patients journey on discharge from hospital:

- a dedicated resource in Emergency departments to support rapid discharge from hospital
- D2A – discharge to assess beds, and additional mental health support
- Participation in HIT team in acute services in time of escalation to minimise use of care capacity and ensure correct discharge pathways are followed
- Independence at home – reablement home care to support D2A process

12.2 BHCC Families, Children and Learning Directorate

It is important to involve services for children and families in winter preparations and health protection, particularly in order to [reach the city's schools](#). Schools closures have a clear impact on the city, and support to business continuity planning in educational settings is available. Key city gritting routes do not always cover all individual routes to schools. Following the mandatory school closures earlier in 2020 as part of the Covid pandemic response, schools, their pupils and their families are more set up for and experienced in home and remote learning techniques. This could help with school's badly affected by poor weather.

A Families, Children and Learning (FCL) departmental representative attends the Health Protection & Screening Forum and it is hoped this will result in further opportunities to coordinate city winter planning. Services and information to support families in fuel poverty will be widely shared through FCL networks. [Children's centres](#) and [Council nurseries](#) distribute weather related posters and leaflets, promote the Flu vaccine and can sign-post families for advice on fuel poverty. Private, voluntary and private early years childcare settings can be sent information to pass on advice to families. The Family Information Service can also pass on information using their Twitter account and Facebook page. The [Family Information Service](#) and the [Integrated Team for Families](#) can provide advice for families to reduce fuel poverty. Information about the seasonal Flu vaccinations generally and the schools based vaccination programme will be shared through wider FCL networks. Children under 5, pregnant women are recognised at risk groups.

All schools, early years and children's services will be operating under strict COVID-19 guidelines over Winter 2021/2022. The NHS Flu Vaccination programme has been extended to cover all school years from Reception to year 11. There is a commitment to continue with the successful levels of vaccination uptake as seen in previous years. BHCC will be offering a reimbursed Flu vaccination to all school staff who are not eligible for the free NHS one.

12.3 BHCC Seafront Team

The City recognises that numbers of rough-sleepers across the city have risen, and this is a particular problem for the seafront area.

It has been acknowledged that advice to traders re flood defences etc can be obtained from the YouGov website at

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/451622/LIT_4284.pdf

The [Seafront Office](#) will issue a warning email to seafront businesses if the Met Office weather warnings identify a specific risk of overtopping or coastal flooding in Brighton & Hove.

A number of products such as flood sacks etc can be locally obtained from B&Q and Travis Perkins etc.

Events such as the B&H 'Christmas Day Swim' are kept under review. The team put out public safety signage and press releases about the dangers of swimming in the sea at this time of year in the lead up to Christmas., The swim is not an 'event' which is recognised by the council as it has no formal organiser and has no safety cover (Brighton Swimming Club do not wish to be responsible). The Seafront Office are on duty on Christmas Day and will advise the public not to enter the water if they are considering it. However, the Seafront Officers are not there to provide lifeguard cover as this is not their role.

12.4 Cityclean

Cityclean (01273 294706/01273 292229) staff working for BHCC and trained as gritter drivers are on a rota for the winter season and operate under the direction of the BHCC 'Winter Duty Officer' who will advise on weather and road conditions, and on action required by the team. Road gritting routes cover main roads, all bus routes and access roads to emergency services such as ambulance stations. In severe snowfall, additional Cityclean staff working for BHCC may work on pavement clearance for identified priority areas such as city centre and hospital entrances. There are 7 gritters (including a pavement gritter) and they will all be serviced before the start of the Winter Gritting period.

12.5 The BHCC Highways Winter Service Plan 202 -21

This plan states the Councils gritting and monitoring arrangements specifically relating to public roads and pavements. It is available on the council's public website (see below).

The Local Authority maintains an information page on the council's public website, which provides advice on winter weather (see <http://www.brighton-hove.gov.uk/content/parking-and-travel/roads-and-highways/winter-weather>) and driving and 'what you can do' as well as on 'what the Council does'. The link to this page is: <https://www.brighton-hove.gov.uk/content/parking-and-travel/roads-and-highways/winter-road-maintenance>

The highways plan ensures that roads to NHS hospitals are gritted, as well as ambulance stations. Clearance of pavements which lead to those hospitals are also on the Priority list.

B&H Bus Company's routes are on the City's gritting routes. Salt is good at combating ice but the addition of the buses and other heavy transport is needed to make it as effective as possible, Salt will only melt a very thin layer of snow or ice so anything more than snow flurries will settle on gritted roads. Under such circumstances, the aim is to reclaim the network as soon as possible using a grit/salt mixture and snow ploughing. It is important to keep the buses running where possible to help break up snow but that is an operational decision for the bus company. Issues for Brexit; reduction in vehicle part access, fuels, etc will be covered by Business Continuity Plans

Pavement clearance will also be carried out during snow events. Grit bins are provided across the coldest, steepest areas of the city for the public to use.

The service operates from 1 November until the end of March, 24 hours a day, 7 days a week. The period may be extended on a day-to-day basis in cases of severe cold weather continuing into April or starting earlier in October.

12.6 BHCC Flood Management

The Council's focus is on groundwater and surface water (the Environment Agency retains responsibility for main rivers and seas) which are the main flood risks to the City. The approach is to reduce (not eliminate) risk through strategic intervention. The following strategic flood management documents are being updated. Links to our current plans and strategies are found here:

- [Strategic Flood Risk Assessment](#)
- [Surface Water Management Plan](#)
- [South East River Catchment Flood Risk Management Plan](#)
- [Local Flood Risk Management Strategy](#)

12.7 BHCC Housing

The team has responsibility for the Council's stock of social and seniors housing. The Housing Sustainability & Affordable Warmth Manager works closely with the Public Health lead for fuel poverty & EWDs to plan annual winter warmth initiatives. Energy saving advice is available for vulnerable council tenants from the Housing Inclusion Team.

In an emergency the service is committed to stopping non-urgent work and to re-deploy housing staff to other services who need extra support. The Estates Services provide salt and equipment to residents to help clear communal pathways to blocks. The Council's Housing Repairs and Maintenance service and heating contractor run out of hours services. They maintain winter contingency stock including heaters etc. Out of hours the duty housing officer is contactable via the Emergencies and Resilience Team or via [Carelink](#).

12.8 BHCC Emergency Planning and Resilience team (EP&R)

Transport hub arrangements and lists of community volunteers are annually reviewed. The B&H Transport Hub results from an agreed arrangement between partners to support BHCC in running a hub facility during periods of severe weather. The Transport Hub is managed and staffed via the agreement, and by an operational document. The Hub (once setup) will:

- Ensure an overview is maintained on weather conditions.
- Liaise with the BHCC Highways department and media sources to understand the impacts of the severe weather on the cities road's.
- Understand the implications of the weather falling on roads on transport providers including buses and taxis.
- Coordinate available 4 x 4 resources (including via the NHS MOU with Sussex 4x4 Response), from partner organisations and local community volunteers Match local prioritised requests for 4x4's against availability.
- Work with community and voluntary sector groups who may be able to assist with the community response to severe weather events.

The [BHCC 'EP&R Team'](#) and the Public Health lead for Health Protection and resilience both engage with external partners including the Sussex Resilience Forum (SRF), and the Sussex Local Health Resilience Partnership (LHRP), and responding agencies to ensure that B&H is fully engaged in planning, testing and exercising severe weather and winter-related plans at both the Sussex and local levels.

De-Briefing & Support Should there be a severe weather incident, a de-briefing should be held to ensure lessons are identified and learnt, and also partners should ensure that support is offered to staff in appropriate cases. This is usually led by the EP&R team.

12.9 Clinical Commissioning Group

Local plans are in place to respond to escalations in pressure in the local health system. The level of pressure is gauged using the Operational Pressures Escalation Level Framework (OPEL) and the local response to the escalation levels identifies a set of actions to be taken by all partners within the BUSH health system to manage the increased levels of pressure. This now includes COVID-19 assessments, impacts and mitigations as C-OPEL. As the CCGs in Sussex are working in close alignment, the plans for the UHS East System are now closely aligned with the plans of support neighbouring trusts.

The aim of using the C-OPEL Framework is to ensure planned or elective as well as urgent care services operate as effectively as possibly in delivering year round services for patients.

The key objectives are to ensure sustainable delivery of the two national NHS service standards i.e. the 4 hour A&E standard and 18 weeks for referral to treatment for planned care. These are achieved by a system-led process known as 'SHREWD' which provides real-time monitoring of hospital flow and capacity and is able to report information nationally. Locally the system is overseen by senior management at UHS EAST and the CCG.

Appendix 2 has the overarching NHS Winter Plan

12.10 University Hospitals Sussex NHS Foundation Trust

Plans are reviewed annually at UHS. The Trust participates in the NHS Operational Pressures Escalation Level (OPEL) procedures, which are centred around the Hospital Trusts geographic area and seeks to ensure that 'capacity management' issues are monitored effectively and where all resources in the local health care system (including those of BHCC) are managed on a daily basis by a teleconference and reported/monitored using appropriate management tools. It now includes risk and pressures in the system relating to COVID19 as C-OPEL. It is led by the CCG's Director of Resilience. It is recognised that the Trust is often at high levels of escalation, but the issues are actively managed with the support of other organisations.

The Trust is committed to raising staff Flu vaccination levels and vaccinate other eligible groups as identified in the annual Flu letter. Business Continuity Plans are regularly updated. UHS operates using COVID19 infection prevention and control guidance for the safety of staff, patients and partner organisations. Plans are in place for the EU exit in light of supplies, equipment, staffing and medicines.

12.11 Sussex Community NHS Foundation Trust

SCFT provides out-patient clinics on-site and teams of healthcare staff such as Health Visitors, who deliver frontline community health services to patients in B&H and across wider Sussex. The Immunization Team is part of this Trust and contributes to the annual Flu vaccination programme. The Trust maintains service level Business Continuity Plans and has access to 4x4 vehicles to deliver its role during severe weather. The Trust has a Cold Weather Plan, Winter Plan and Escalation Plan which are available to staff on the Trust intranet. Staff and patients are provided advice on all aspects of winter health that can be found on [NHS How to Stay Well This Winter](#) and the [Keep warm- keep well leaflets](#). SCFT operates using COVID19 infection prevention and control guidance for the safety of staff, patients and partner organisations. Plans are in place for the EU exit in light of supplies, equipment, staffing and medicines.

12.12 IC24 (NHS Out of Hours Provider)

IC24 provides out of hours and roving GP services to B&H and to E Sussex, as well as a GP in A&E at Royal Sussex County Hospital, a walk-in service and other facilities. The organisation may have challenges in providing some services during periods of adverse weather but may access 4x4 support via links with Adult Social Care and the CCG.

12.13 British Red Cross

BRC has agreed to link with BHCC and other local services and is available to support them during periods of severe winter weather. BRC have other winter provision available in B&H:

- A 24 Emergency Response Messaging service which will mobilise staff and volunteers as required, 24/7/365 to support people in crisis and depending on what the situation is, if BRC can help, they will respond.
- The basic “offer” to B&H is to provide practical and emotional support, work in Rest Centres, providing transportation during bad weather and home welfare checks on vulnerable individuals.
- BRC can also provide blankets, hot drinks etc and staff.
- If made aware of a longer term failure of infrastructure or facilities, then BRC may be able to call in our dedicated communications or catering units to provide operational support to large groups of people.

12.14 Community and Voluntary sector

The CVS is increasingly involved in supporting the planning for winter resilience. This is both through their networks across the city into neighbourhoods and groups working with those more vulnerable to cold.

There are services provided by a wide variety of organisations to help those in fuel and food poverty. These include Age UK, NEA, Brighton & Hove Citizens Advice Bureau , Brighton and Hove Energy Services Co-operative (BHESCO), the British Red Cross, The Fed Lions, Club and others.

The strength of the partnership approach taken during the COVID-19 response has established a shared approach to supporting those most vulnerable in the city and this will be especially important in addressing the demand of the cold weather, Flu, self-isolation for COVID-19, its socio-economic impacts.

The CVS are represented at the BHCC Flu Planning meetings and the Sussex Programme board.

Groups are becoming increasingly involved in various parts of the City prone to weather and cold-related risks. Examples include ‘Time To talk befriending’, ‘One Church Brighton’, Neighbourhood Watch and the Woodingdean Residents Association.

12.15 Brighton & Hove Energy Services Co-operative

[BHESCo](#) aims to improve resident's thermal comfort targeting vulnerable people in hard to heat homes, thereby reducing EWD's, and provide advice to consumers including action on tariffs, switching energy supplier and take up of energy efficiency offers. They have some funding to pay for simple measures like weather stripping, secondary glazing film, energy meters and radiator reflectors. Other areas of housing-related concern include the elderly, vulnerable and socially isolated. There are good links to other BHCC housing teams and other stakeholders.

13 Communication

13.1 Three areas of communication

The three areas of communication are: Awareness, Warning & informing and Advising the public.

13.2 Awareness

Pre 1st November each year. This will be done through the national and local campaigns , by informing and educating the public about the risks of cold weather, and how people in the identified vulnerable groups can prepare themselves.

['Help Us, Help You' Stay Well This Winter](#)

The Public Health England and NHS England marketing campaign, 'Help Us, Help You - Stay Well this Winter', will run starting in September. This phased campaign aims to help those with long-term health conditions (particularly respiratory conditions), older people, school children, pregnant women and parents of under-5s stay well and keep their loved ones well this winter. This includes messages about Flu vaccination, contacting NHS 111, seeking advice at the first signs of a winter illness, accessing evening and weekend GP appointments and the advantages of consulting with community pharmacists. It will include COVID-19 messages also.

Further information is available from:

<https://campaignresources.phe.gov.uk/resources/campaigns/34-stay-well-this-winter/overview> which also provides a link to sign up for email updates.

'Top Tips for Keeping Warm and Well', in collaboration with Age UK. The leaflet is targeted at pensioners in receipt of pension credit in England, Scotland and Wales. It will sit alongside an updated 'Keep Warm Keep Well' booklet, found at:

<https://www.gov.uk/government/publications/keep-warm-keep-well-leaflet-gives-advice-on-staying-healthy-in-cold-weather>

The CCG runs a winter communications campaign titled '#HelpMyNHS'. This is run across Sussex . The campaign encourages people to use A&E and GP services appropriately and highlight the other services available. There is a strong focus on self-care and prevention, which links into the NHS England campaign as described

above. The local campaign will start during November and includes communications materials, marketing and a media campaign.

13.3 Warning

At each change of cold weather level. The Met Office will communicate to the public any change in levels and what the changes means, taking into specific account the local weather warnings.

13.4 Local Warning and Informing

Immediately when Level 2 and above is reached. BHCC Public Health staff and Emergency Planning & Resilience Team will liaise with CCG and BHCC Communications staff to agree a local interpretation of public messages, based on then Public Health messages as taken from the national plan.

13.5 Staff information

All partner agencies will ensure that suitable messages are also passed to staff, detailing warnings where appropriate, actions to be taken, and measures in line with their Business Continuity Plans, which must be kept up to date. This may include the need to re-deploy staff during severe weather, arrangements for home-working where appropriate, support to access Covid-19 and Flu vaccinations, and proactive information on how to stay safe and keep well during the winter months

14. Key public health messages

14.1 These are the core messages to be broadcast as official weather warnings alongside national and regional weather forecasts. They may be expanded or otherwise refined in discussion with broadcasters and weather presenters.

Key public health messages

Take up your Covid-19 vaccination when it is offered/available

Contact your GP or pharmacist if you think you, or someone you care for, might qualify for a free Flu jab.

Free Flu vaccinations are available for those who are at risk. For a full list see the annual Flu plan, available at: www.gov.uk/government/collections/annual-flu-programme

Keep your home warm, efficiently and safely:

- heating your home to at least 18°C in winter poses minimal risk to your health when you are wearing suitable clothing

- get your heating system and cooking appliances checked and keep your home well ventilated
- use your electric blanket as instructed and get it tested every 3 years
- never use a hot water bottle with an electric blanket
- do not use a gas cooker or oven to heat your home; it is inefficient and there is a risk of carbon monoxide poisoning and this can kill
- make sure you have a supply of heating oil or LPG or solid fuel if you are not on mains gas or electricity – to make sure you do not run out in winter

Keep in the warmth by:

- fitting draught proofing to seal any gaps around windows and doors
- making sure you have loft insulation. And if you have cavity walls, make sure they are insulated too
- insulate your hot water cylinder and pipes
- draw your curtains at dusk to help keep heat generated inside your rooms
- make sure your radiators are not obstructed by furniture or curtains

Look after yourself:

- food is a vital source of energy and helps to keep your body warm so have plenty of hot food and drinks
- aim to include 5 daily portions of fruit and vegetables. Tinned and frozen vegetables count toward your 5 a day
- stock up on tinned and frozen foods so you don't have to go out too much when it's cold or icy
- exercise is good for you all year round and it can keep you warm in winter
- if possible, try to move around at least once an hour. But remember to speak to your GP before starting any exercise plans
- wear lots of thin layers – clothes made from cotton, wool or fleecy fibres are particularly good and maintain body heat
- wear good-fitting slippers with a good grip indoors and shoes with a good grip outside to prevent trips, slips and falls
- make sure you have spare medication in case you are unable to go out
- check if you are eligible for inclusion on the priority services register operated by your water and power supplier

Look after others:

- check on older neighbours or relatives, especially those living alone or who have serious illnesses to make sure they are safe, warm and well

Get financial support:

there are grants, benefits and sources of advice to make your home more energy efficient, improve your heating or help with bills. It's worthwhile claiming all the benefits you are entitled to before winter sets in.

Specific messages related to the Levels suggested in national Plan

Level 1: Winter preparedness and action

A spell of chilly weather might warrant a message along the lines of:

“If this does turn out to be a spell of severe cold weather, we’ll try to give you as much warning as possible. But in the meantime, if you want advice about protecting your health from the cold go to the winter health pages at www.nhs.uk. If you are worried about your health or that of somebody you know, ring NHS 111.”

Level 2: Alert and readiness

The Met Office, in conjunction with UKHSA, is issuing the following cold weather warning for [regions identified]:

“Severe cold weather can be dangerous, especially for the very young or very old or those with chronic disease. Advice on how to reduce the risk either for yourself or somebody you know can be obtained from the winter health pages at www.nhs.uk or from your local chemist. If you are worried about your health or that of somebody you know, ring NHS 111.”

Level 3 and 4: Severe cold weather action/emergency

The Met Office, in conjunction with UKHSA is issuing the following severe cold weather advice for [regions identified]:

“Make sure that you stay warm. If going outside make sure you dress appropriately. If indoors, make sure that you keep your heating to the right temperature; heating your home to at least 18°C in winter poses minimal risk to your health when you are wearing suitable clothing. If there is anyone you know who might be at special risk, for example, an older person living on their own, make sure they know what to do to stay warm and are well stocked with food and medications. If you are worried about your health or that of somebody you know, ring NHS 111”

Appendix 1

Please find the full set of Action Cards here and these are updated nationally <https://www.gov.uk/government/publications/cold-weather-plan-action-cards-for-cold-weather-alert-service>

Appendix 2



BH HOSC 21-22
Winter Plan Update

NHS Winter Plan 2021 – Brighton & Hove CCG