The purpose of this document is to describe the collaborative arrangements put in place by Southern Health NHS Foundation Trust (SHFT) to support service delivery throughout the winter period.

**Keywords:** Winter, Cold, Weather, Winter Period, Snow, Ice, 4x4, Transport.

**Target Audience:** All employees of Southern Health NHS Foundation Trust. Non-Executive Directors, Volunteers, Governors and Contractors.

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<table>
<thead>
<tr>
<th>Date</th>
<th>Author</th>
<th>Version</th>
<th>Page</th>
<th>Reason for Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 2016</td>
<td>Philip Rudin</td>
<td>2</td>
<td></td>
<td>Annual review</td>
</tr>
<tr>
<td>October 2017</td>
<td>Philip Rudin</td>
<td>3</td>
<td></td>
<td>Annual review, including updates from divisions and teams to reflect current plans and revised ISD operational structure.</td>
</tr>
</tbody>
</table>

Reviewers/contributors

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Version Reviewed &amp; Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPRR Working Group</td>
<td></td>
<td>Version 4, November 2018</td>
</tr>
<tr>
<td>Section</td>
<td>Title</td>
<td>Page</td>
</tr>
<tr>
<td>---------</td>
<td>----------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>1</td>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>2</td>
<td>Key pressures</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>Cold weather alerts</td>
<td>4</td>
</tr>
<tr>
<td>4</td>
<td>Business continuity planning</td>
<td>5</td>
</tr>
<tr>
<td>5</td>
<td>Workforce</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Estates and facilities management</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Procurement/supply chain</td>
<td>6</td>
</tr>
<tr>
<td>8</td>
<td>IT Systems Resilience and Plans for Remote Working Capabilities</td>
<td>6</td>
</tr>
<tr>
<td>9</td>
<td>Communications</td>
<td>7</td>
</tr>
<tr>
<td>10</td>
<td>Financial planning</td>
<td>7</td>
</tr>
<tr>
<td>11</td>
<td>Escalation framework</td>
<td>7</td>
</tr>
<tr>
<td>12</td>
<td>Adverse weather response</td>
<td>8</td>
</tr>
<tr>
<td>13</td>
<td>Useful links</td>
<td>8</td>
</tr>
<tr>
<td>A1</td>
<td>Appendix 1: Cold weather action cards</td>
<td>9</td>
</tr>
<tr>
<td>A1a</td>
<td>Appendix 1a: Cold Weather Alert Level Actions – Health Frontline Staff</td>
<td>10</td>
</tr>
<tr>
<td>A1b</td>
<td>Appendix 1b: Cold Weather Alert Level Actions – GPs and practice staff</td>
<td>12</td>
</tr>
<tr>
<td>A2</td>
<td>Appendix 2: The impact of cold weather on health</td>
<td>13</td>
</tr>
<tr>
<td>A3</td>
<td>Appendix 3: Signs and symptoms of hypothermia</td>
<td>14</td>
</tr>
<tr>
<td>A4</td>
<td>Appendix 4: Driving in severe weather</td>
<td>16</td>
</tr>
<tr>
<td>A5</td>
<td>Appendix 5: Business continuity plan checklist</td>
<td>18</td>
</tr>
<tr>
<td>A6</td>
<td>Appendix 6: Business Continuity Table Top Exercise – Snow scenario</td>
<td>19</td>
</tr>
</tbody>
</table>
Winter Resilience & Cold Weather Plan

1. Introduction

1.1 The purpose of this document is to describe the arrangements put in place by Southern Health NHS Foundation Trust (SHFT) to support service delivery throughout the winter period.

1.2 SHFT consider maintaining organisational readiness and resilience, and responding to operational pressures to be a year-long function. However, an additional focus is required during the winter period, when it is recognised that demand for services is likely to be at its highest level.

1.3 A co-ordinated approach is therefore essential to ensure that preparation is robust and that processes are in place that can adapt to the different pressures as and when they arise.

1.4 To ensure the organisation can respond to significant peaks in demand, SHFT has a Major Incident Policy (SH NCP 56) which is supported by associated plans and action cards. These documents are underpinned by the individual service’s Business Continuity Plans (BCPs) which detail how capability and capacity is maintained at peak times. These plans also support other healthcare organisations across the area, including Local A&E Delivery Boards.


2. Key Pressures

2.1 The key pressures posed by winter include:

- Increased demand on the whole system due to the cold weather resulting in increased heart attacks, strokes, respiratory diseases, influenza, falls, injuries, hypothermia and carbon monoxide poisoning, and the indirect effects of cold weather such as depression and other mental health illnesses.
- Staffing pressures due to the health effects of cold weather as detailed above.
- The impact of extreme weather on road and rail networks making travel to and from work and while at work difficult.
- Potential disruption to critical supply chain infrastructures.

3. Cold Weather Alerts

3.1 The Trust follows the national Met Office Cold Weather Alerts. There are five levels of alert (levels 0-4), from year-round planning for cold weather, through winter and severe cold weather action, to a major national emergency.
3.2 Cold weather alert levels from the Met Office Cold Weather Plan:

<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 0</td>
<td>Long-Term Planning - All year</td>
</tr>
<tr>
<td>Level 1</td>
<td>Winter Preparedness Programme - 1 November to 31 March</td>
</tr>
<tr>
<td>Level 2</td>
<td>Severe Winter Weather is Forecast – Alert and Readiness</td>
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<tr>
<td></td>
<td>Mean temperature of 2°C and/or widespread ice and heavy snow are predicted</td>
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<td></td>
<td>within 48 hours, with 60% confidence</td>
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<tr>
<td>Level 3</td>
<td>Response to Severe Winter Weather – Severe Weather Action</td>
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<tr>
<td></td>
<td>Severe winter weather is now occurring: mean temperature of 2°C or less</td>
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<tr>
<td></td>
<td>and/or widespread ice and heavy snow</td>
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<tr>
<td>Level 4</td>
<td>Major Incident – Emergency Response - Central Government will declare a</td>
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<td>Level 4 alert in the event of severe or prolonged cold weather affecting</td>
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<td>sectors other than health.</td>
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</tbody>
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3.3 Each alert level triggers a series of actions for teams to take in response. These actions are detailed in the Cold Weather Action Cards at Appendix 1. The Trust’s Business Continuity and Emergency Preparedness Officer will be responsible for circulating the appropriate action card once each level is triggered.

3.4 Supporting information to these action cards is provided in:

- **Appendix 2** - The impact of cold weather on health (including the impact and groups at greater risk of harm from cold weather)
- **Appendix 3** - Signs and symptoms of hypothermia

3.5 Directors on Call (DoC) can access either directly from their own Outlook accounts or via the ICC generic user account the Met Office Cold Weather Alerts, which are sent to the emergencyplanning@southernhealth.nhs.uk email account. In addition there is a direct access for the DoC and, where relevant the Incident Management Team, to the NHS Wessex and Hampshire/IOW LRF Resilience Direct pages.

4. Business Continuity Planning

4.1 All Trust services have a Business Continuity Plan (in line with **SH NCP 67: Business Continuity Management Policy**). This details how their service will perform its functions in the event of disruption (e.g. adverse weather, increase in demand) by defining and prioritising their prioritised activities/services. The BCPs detail contingency arrangements during the disruption and, when the disruption has passed, how all services will be restored.

4.2 Teams should refer to their local BCP whenever there is likely to be/or is a disruption to their service.

4.3 **Appendix 5** provides a checklist for checking BCPs are up-to-date. **Appendix 6** provides a winter based table top exercise which teams should use to test the robustness of their local plans.

5. Workforce

5.1 **SH HR 42: Management of Staff Business Continuity Policy** is based on a framework across the South Central health area to ensure that all Trusts are able to continue their functions when business continuity is challenged for any reason, such as an increase in demand, extreme weather, or widespread illness.
5.2 Business Continuity Plans contain information as to where various staff groups could be redeployed if required.

5.3 SHFT has an annual seasonal flu vaccination campaign. Vaccination is available to all staff and is provided through on site flu clinics. This is supplemented by a peer vaccination programme and options for reimbursement from community pharmacies. Weekly monitoring of uptake is planned with regular reports being provided to the Department of Health. The campaign is supported by a proactive communication and engagement plan. Further information is available on the Trust’s intranet - [http://intranet.southernhealth.nhs.uk/my-trust/be-a-flu-fighter/](http://intranet.southernhealth.nhs.uk/my-trust/be-a-flu-fighter/)

6. Estates and Facilities Management

6.1 Estates and Facilities has scalable contingency arrangements to deal with a range of scenarios for relocation of Estates’ staff and contractors to support critical building functions through staff absence.

6.2 This will be addressed via a single point of contact to manage re-planning and allocation of works. In cases of higher staff absence levels daily monitoring of staff and contracted staff availability would be undertaken with a review of service activity and reprioritisation to support clinical services, and maintaining emergency stock availability to ensure provision of service for sites.

6.3 In extreme circumstances Estate Services contingencies will ensure that arrangements are in place to only provide essential services prioritised with all directorates. Winter weather contingency measures include business continuity arrangements for catering and laundry, and contracts for gritting and ensuring that clear access for Trust buildings are in place. N.B. some of these contracts are with NHSPS as landlord.

7. Procurement/ Supply Chain

7.1 The Procurement Team has arrangements in place to maintain continuity of the ordering service to the Trust. Individual contracts include business continuity arrangements.

7.2 NHS Supply Chain is a key supplier of clinical goods and has a continuity plan which includes plans for adverse weather that affects their ability to deliver.

7.3 The Procurement Team will support the divisions to ensure staff order in good time to cope with holiday periods, expected bad weather, etc.

7.4 Divisions will, in liaison with the Procurement Team, proactively identify critical supply issues and implement plans to prevent potential supply chain delays to minimise any services continuity impact and any patient safety risk.

8. IT Systems Resilience and Plans for Remote Working Capabilities

8.1 The Technology Team have business continuity plans which cover the delivery of their critical services should these be impacted by unplanned incidents.

8.2 In addition to this, Southern Health IT provides a number of mechanisms to support staff that may not be able to get to their normal place of work –

- The Trust has deployed over 3,800 laptops which enable staff equipped with these devices to work from any site with Wi-Fi provision (not just Southern Health), including working from home
• Many of these devices are 3G enabled or staff have smartphones with 3G data plans and where there is a good signal staff can use these connections
• The Trust has also implemented a solution so that staff can work remotely from any PC and can rapidly expand this solution to provide this at scale if required

8.3 The IT Support Team can work from any site and can connect remotely to the Trust’s call handling system. Incoming service desk calls can be diverted to other sites.

8.4 The Trust’s core clinical systems are hosted by partner organisations or by national service providers. These systems have business continuity and disaster recovery arrangements set out within national contracts or service level agreements.

8.5 Teams that include remote working in their Business Continuity Plans must consult with the Trust’s Head of IT Operations to confirm that sufficient capacity exists.

9. Communications

9.1 The Trust’s Business Continuity and Emergency Preparedness Officer and Communications Team will work collaboratively to ensure that a communications plan is in place to support national NHS winter campaigns and to communicate with staff, the public and stakeholders.

9.2 A communications plan will also exist to support the Staff Flu vaccination campaign.

9.3 The public website, social media channels and the wider media are used to communicate important messages to the public.

9.4 The Trust communicates routinely with its staff via line management structures, the Weekly Bulletin and the staff intranet. In addition ad hoc All Staff Bulletins can be cascaded in exceptional circumstances.

10. Financial Planning

10.1 The Chief Finance Officer will ensure that adequate resources are available to meet any surge in demand during the winter period or other emergency situation, through a combination of planning contingency funding (held centrally) and negotiating additional resources with Clinical Commissioning Groups where additional capacity is required.

11. Escalation Framework

11.1 Southern Health NHS Foundation Trust (SHFT) recognises the importance of clear escalation procedures to maintain services and quality of care. In winter months and during cold weather, this is particularly important.

11.2 Working in partnership with NHS England and acute and social care partners, SHFT has been an active partner in developing A&E Delivery Board escalation plans across the respective health economies and all key Commissioning areas. These plans clarify capacity management and escalation arrangements and have been agreed across the local health economies.

11.3 SHFT uses surveillance information from Public Health England (Formally Health Protection Agency) and local acute trusts to support planning. Policies are available on the management of infection (pandemic flu, hand hygiene, D&V, norovirus etc.), and the SHFT Infection Prevention and Control Team works closely with frontline staff to ensure these are implemented and staff are fully trained.
12. **Adverse weather response**

12.1 In the event of disruption from adverse weather, services should refer to their local Business Continuity Plan (BCP) in the first instance. Services should work proactively, as part of their business continuity planning, to develop local arrangements in response to adverse weather such as snow. These should also be tested to ensure that they’re robust. **Appendix 6** provides a winter based table top exercise which teams should use to test the robustness of their local plans.

12.2 Once local arrangements have been exhausted and further support is required, a request for support should be raised to the Trust’s Business Continuity and Emergency Preparedness Officer or Director on Call. This may be coordinated via the Trust’s Incident Coordination Centre (ICC) if it has been established.

12.3 The Trust’s Business Continuity and Emergency Preparedness Officer will maintain a central log of partner/third organisations that can provide mutual aid (e.g. 4x4 volunteers) should it be required; however this should not be relied upon.

12.4 **Appendix 4** provides guidance on driving in severe weather, including the recommendation of keeping an emergency kit in the car.

13. **Useful links**

- **Southern Health NHS Foundation Trust’s SH NCP 67: Business Continuity Management Policy** - [http://intranet.southernhealth.nhs.uk/tools-and-resources/policies/?entryid41=87139&q=0%7ebusiness+continuity%7e](http://intranet.southernhealth.nhs.uk/tools-and-resources/policies/?entryid41=87139&q=0%7ebusiness+continuity%7e)


- **The Met office – Severe Weather Warnings** - [http://www.metoffice.gov.uk/public/weather/warnings/?regionName=uk](http://www.metoffice.gov.uk/public/weather/warnings/?regionName=uk)


Appendix 1: Cold Weather Action Cards

Introduction
The Met Office operates a Cold Weather Alert service in England from 1 November to 31 March. During this Time, the Met Office may forecast periods of severe cold weather on the basis of one of two measures:

a. Low temperatures
b. Widespread ice and/or heavy snow

The Cold Weather Alert service comprises five main levels from Level 0 (long-term winter planning) and, between 1 November and 31 March, Levels 1 to 4, from winter and cold weather preparedness to a major national emergency.

Cold Weather Alert level actions
Each alert level will trigger a series of actions in response to these alert levels by Southern Health NHS Foundation Trust (SHFT) as detailed in the Cold Weather Action Cards below.

The actions for each alert level are not intended to be an ‘all or none’ situation. Staff will exercise their professional judgement when in contact with a patient or client and respond appropriately to that patient’s needs by being aware of the effects of cold weather on health. When they notice a client or patient is at risk, for example from a cold home, they will refer on to appropriate organisations who are able to deal with energy efficiency, heating and benefit issues.

Cold Weather Action Cards are provided below for –

1. Health and social care frontline staff
2. GP’s and practice staff
### Appendix 1a: Cold Weather Alert Level Actions – Health Frontline Staff

#### Level 0: Year-round planning (All year)
- Identify those who are vulnerable to cold weather and working to the Trust’s information governance procedures share this information with partner agencies.
- Ensure that all staff are aware of the Trust’s Winter Resilience and Cold Weather Plan (SH NCP 73) and the dangers of cold weather to health and know how to spot signs and symptoms.
- Use clinic attendance and home visits as opportunities to identify vulnerable people and discuss winter preparedness.
- Ensure that clients and colleagues are aware of and have taken advantage of flu and other vaccination programmes.

#### Level 1: Winter preparedness and action (1 November to 31 March)
- Identify those at risk on your caseload and make necessary changes to care plans for high-risk groups.
- For those with multiple agency inputs, ensure that the key worker is clearly identified and care plans consider measures to reduce risk from cold weather.
- Remind clients of the actions they can take to protect themselves from the effects of severe cold; including warm clothing, warm food and drinks; keeping active as much as they are able within the context of their care plan.
- Signpost those at risk clients/patients to other services (e.g. home insulation schemes; benefits entitlements) when identified in ‘clinical’ situations; use the [Keep Warm Keep Well booklet](#) for up-to-date patient information and advice.
- Use resources available to you for raising awareness of the health risks associated with winter weather and cold housing (for example, pharmacists have a key role in reminding people to have sufficient medicine and help with preventive medicines managements).
- Consider using a cold weather scenario as a table-top exercise to test your business continuity arrangements.
- Encourage clients and colleagues to be vaccinated against flu, if not already.

#### Level 2: Severe winter weather is forecast – Alert and readiness (Mean temperatures of 2°C and/or widespread ice and heavy snow is predicted with 60% confidence)
- As appropriate, contact those most at risk and implement care plans.
- Ensure urgent signposting for those at risk (e.g. in cold housing) to appropriate services.
- Continue to remind clients of the actions they can take to protect themselves from the effects of severe cold.
- Consider how forecast weather conditions may impact on your work – and make appropriate arrangements.
- Make sure you and your teams are prepared for an influx of weather-related injuries and illnesses.

#### Level 3: Severe weather action (Mean temperatures of 2°C and/or widespread ice and heavy snow)
- As appropriate, contact those at risk (visit, phone call) daily.
- Ensure staff can help and advise clients.
- Other actions as per level 2.
- Maintain business continuity.
Level 4: Major incident – Emergency response

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

- Continue actions as per level 3 unless advised to the contrary.
Appendix 1b: Cold Weather Alert Level Actions – GPs and practice staff

**Level 0: Year-round planning (All year)**

- Promote flu immunisation to both staff and patients.
- Ensure GPs and staff are aware of local services to improve warmth in the home.
- Consider training on seasonal weather and the identification of vulnerable individuals to help staff be more aware of the effects of cold weather on health; those groups of patients likely to be most vulnerable; and how they can signpost patients on to other services.
- Consider utilisation of tools to aid systematic identification of vulnerable individuals.
- Consider using opportunistic approaches to signpost appropriate patients to other services when they present for other reasons. For example, flu jab clinics can be an opportunity to promote core public health messages with vulnerable individuals.

**Level 1: Winter preparedness and action (1 November to 31 March)**

- Consider how you can promote key public health messages in the surgery. For example, take advantage of clinical contacts to reinforce public health messages about cold weather and cold homes on health.
- Get a flu jab to help protect you and your patients.
- Consider using a cold weather scenario as a table-top exercise to test your business continuity arrangements.
- Be aware of systems to refer patients to appropriate services from other agencies.
- When making home visits, be aware of the room temperature in the household, and if required, know how to advise on levels that are of concern and as necessary, to signpost to other services.
- Consider using Keep Warm, Keep Well booklet for up-to-date information and advice for patients.

**Level 2: Severe winter weather is forecast – Alert and readiness (Mean temperatures of 2°C and/or widespread ice and heavy snow is predicted with 60% confidence)**

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

**Level 3: Severe weather action (Mean temperatures of 2°C and/or widespread ice and heavy snow)**

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

**Level 4: Major incident – Emergency response**

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

- Continue actions as per level 3 unless advised to the contrary
Appendix 2: The impact of cold weather on health

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

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

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

Groups at greater risk of harm from cold weather

- 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 fetus)
- children under the age of 5
- people with learning difficulties
- people assessed as being at risk of, or having had, recurrent falls
- people who are housebound or otherwise low mobility
- people living in deprived circumstances
- people living in houses with mould
- people who are fuel poor
- homeless or people sleeping rough
- other marginalised or socially isolated individuals or groups
Appendix 3: Signs and symptoms of hypothermia

Hypothermia happens when a person's body temperature drops below 35°C (95°F). Normal body temperature is around 37°C (98.6°F). Hypothermia can quickly become life-threatening and should be treated as a medical emergency. Hypothermia is usually caused by being in a cold environment. It can be triggered by a combination of things, including being exposed to the cold for a long time – this can be outdoors in cold conditions, in a poorly heated room or being in cold water.

When the body gets cold it will try to prevent losing more heat by:

- shivering (which keeps the major organs at normal temperature)
- restricting blood flow to the skin
- releasing hormones to generate heat

However, these responses use up energy and may not be enough to maintain body temperature if exposed to the cold for a long time. When the body runs out of energy, it gradually begins to shut down. Shivering stops and heartbeat starts to slow.

**Signs of hypothermia**
The symptoms of hypothermia vary depending on how low a person’s temperature has dropped.

Mild symptoms include shivering, tiredness and confusion. But as the temperature drops, shivering becomes more violent and a person is likely to become delirious, struggle to breathe and may become unconscious.

**Mild hypothermia**
Symptoms of mild hypothermia (generally a body temperature of 32-35°C) can include:

- constant shivering
- tiredness
- low energy
- cold or pale skin
- fast breathing (hyperventilation)

**Moderate hypothermia**
Symptoms of moderate hypothermia (generally with a body temperature of 28-32°C) can include:

- violent, uncontrollable shivering (although shivering can stop completely at lower temperatures as the body is unable to generate heat)
- being unable to think or pay attention
- confusion (some people don't realise they are affected)
- loss of judgment and reasoning (someone with hypothermia may decide to remove clothing despite being very cold)
- difficulty moving around
- loss of co-ordination
- drowsiness
- slurred speech
- slow, shallow breathing (hypoventilation)

**Severe hypothermia**
Symptoms of severe hypothermia (a body temperature of below 28°C) can include:

- unconsciousness (comatose)
• shallow or no breathing
• weak, irregular or no pulse
• dilated pupils

The individual may in fact appear to be dead. Under these circumstances the individual must be taken to hospital in order for it to be decided whether they have died, or are in a state of severe hypothermia. If this is the case, advanced medical intervention may still be able to resuscitate them.

**Hypothermia in babies**

Babies with hypothermia may look healthy but their skin will feel cold. They may also be limp, unusually quiet and refuse to feed.

**When to get medical help**

If someone has been exposed to the cold and they are distressed, confused, have slow, shallow breathing or they’re unconscious, they may have severe hypothermia. Their skin may look healthy but feel cold. Babies may be limp, unusually quiet and refuse to feed.

Medical help should be sought immediately if severe hypothermia is suspected by dialling 999 to request an ambulance.

While waiting for an ambulance, remove any wet clothing and wrap the patient in blankets or towels. If the patient is conscious, give them something warm (but not alcoholic) to drink. If they're unconscious, not breathing and you can't detect a pulse after feeling for 60 seconds at the carotid pulse in the neck, then cardio-pulmonary resuscitation (CPR) should be given.

**Things to avoid**

When treating hypothermia avoid:

• putting the cold person into a hot bath to warm them up – this will cause the blood vessels in the arms and legs to dilate (open up) too quickly and cause a fall in blood pressure to the vital organs such as the brain, heart, lungs and kidneys, possibly leading to cardiac arrest and death.
• giving the person alcohol to drink because it will also cause the blood vessels in the arms, legs and throughout the surface of the skin to dilate too quickly.
Appendix 4: Driving in Severe Weather

Wind and rain, ice and snow – winter can throw the very worst weather at us. To help you prepare for bad weather here is some helpful advice for your journey – provided by the Highways Agency (www.highways.gov.uk)

Whilst the Highways Agency will do everything they can to make your journey easier, there are a lot of things you can do, such as:

- Checking the route for delays and poor weather conditions before you set out
- Planning your journey if you need to travel in severe weather
- Keeping an emergency kit in your vehicle (see page TBC)
- Avoid letting the vehicle fuel supply get too low
- Ensure that lone working procedures are followed

When you are on the road

- Pay attention to the changing road, traffic and weather conditions
- Look out for electronic overhead signs warning of conditions ahead
- Be ready to slow down and take more care if you need to, particularly when approaching a bend and on exposed stretches of road
- Maintain appropriate speed limits and stopping distances

Emergency kits are essential

Keep an emergency kit in the car, including:

- Ice scraper and de-icer
- Torch and spare batteries – or a wind up torch
- Warm clothes and a blanket
- A pair of boots
- First-aid kit
- Road map
- Battery jump leads
- A shovel for snow
- Food and a warm drink in a flask
- Sunglasses to help you see in low winter sun
- A fully charged mobile phone and charger
- A high visibility jacket would be helpful

Be aware of changing road and weather conditions

If it is foggy, raining, snowing or icy, make sure you slow down and keep well back from the vehicle in front of you. Many collisions are caused through not braking in time when the roads are wet or slippery.

Watch out for locations where you may need to drive more carefully, either because of side winds or a greater risk of ice. Look out for:

- Changes in road elevation of exposure
- Where the road passes under or over a bridge, or where traffic is lighter (e.g. slip roads)
- Bends in the road where there is a greater risk of losing control. Reduce your speed when approaching a bend and do not brake suddenly.
Driving through ice and snow
- Clear any snow off the roof of the vehicle before you drive away
- Watch out for icy conditions – look for clues such as ice on the pavement or on your windscreen before you start your journey and take extra care
- Try not to break suddenly – it may lock up your wheels and you could skid further
- Look out for winter service vehicles spreading salt or using snow ploughs. They have flashing amber beacons and travel at slower speeds – around 40mph. Stay well back because salt or spray can be thrown across the road. Do not overtake unless it is safe to do so – there may be uncleared snow on the road ahead.

Driving in rain and floods
- When the road is wet it can take twice as long to stop. Slow down and maintain a safe distance from the vehicle in front
- If your vehicle loses grip, or “aquaplanes”, on surface water take your foot off the accelerator to slow down. Do not break or steer suddenly because you have less control of the steering and brakes
- Try to avoid driving through surface water as you might flood your engine
- If you have to drive through floods, drive slowly, use a low gear and try to keep your engine revving at a high rate. Move forward continuously to avoid stalling the engine. When driving an automatic vehicle, engage and hold in a low gear
- Test your brakes after driving through water; they may be ineffective.

Driving in fog
- Use dipped headlights so that other drivers can see you
- If it is foggy (less than 100m visibility) then switch on your fog lights. Do not forget to turn them off when conditions improve
- Fog is often patchy so try not to speed up as visibility improves. You could suddenly find yourself back in thick fog further up the road.

Driving in windy weather
- Take extra care on the roads and plan your journey by checking the latest weather conditions
- Though high-sided vehicles are particularly affected by windy weather, strong winds can also blow other vehicles off course. This can happen on open stretches of road exposed to strong crosswinds, or when passing bridges, high-sided vehicles or gaps in trees.

More information to help you on your journey
You can get all the latest information on road conditions on England’s motorways and trunk roads:
- Visit the Highways Agency website: www.highways.gov.uk/traffic
- Call the Highways Agency Information Line (HAIL): 0300 123 50000
- Download the Highways Agency iPhone app or access the mobile website: www.highways.gov.uk/mobile
- For further information on weather conditions, consult the Met Office: www.metoffice.gov.uk or listen to local radio broadcasts
Appendix 5: Business Continuity Plan Checklist

A good BCP is an up-to-date BCP!

Things to check:

<table>
<thead>
<tr>
<th>Does the list of activities reflect the current situation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the prioritisation of activities correct?</td>
</tr>
<tr>
<td>Are the actions outlined in the plan sufficiently detailed so that they can be implemented by staff other than team leaders/managers?</td>
</tr>
<tr>
<td>Are there any outstanding preparation actions that need to be completed?</td>
</tr>
<tr>
<td>Are the stakeholder contact details complete and up-to-date?</td>
</tr>
<tr>
<td>Is there in the team an up-to-date list of staff contact details?</td>
</tr>
<tr>
<td>Does the BCP state where the staff contact details list is held and how to access it in the event of an incident?</td>
</tr>
<tr>
<td>Does everyone in the team know where the BCP is, what is says, and what their role might be in the event of an incident?</td>
</tr>
</tbody>
</table>
Appendix 6: Business Continuity Table Top Exercise – Snow scenario

Scenario

It’s a Monday morning in late January. Over the last week the weather has been dry but very cold.

Last night the forecasted “light” snowfall turned out to be much heavier than predicted and coupled with high winds has resulted in major disruption to transport.

In particular almost all minor and the majority of major roads are either completely blocked or passable only with difficulty. There has also been severe disruption to rail services, and bus services are almost non-existent.

As a result the majority of people cannot get to work and local schools have decided to stay closed for at least today and possibly until Wednesday.

Hampshire County Council have issued a warning stating that they expect significant disruption to road transport for at least 48 hours, and have advised people not to attempt to travel unless absolutely necessary.

Action

As a team, take 10-15 minutes to discuss:

- What actions your team would need to take in response to the scenario above
- Identify if there are any actions your team should take now to improve the effectiveness of your teams Business Continuity Plan (BCP)

You can use the template below to develop an action plan once you’ve completed the scenario above.
Team BCP Exercise Action Plan

Team name:

Team lead:

Date the exercise was carried out:

Actions to be taken

<table>
<thead>
<tr>
<th>No.</th>
<th>Description of action</th>
<th>Action lead</th>
<th>Target completion date</th>
<th>Progress/comments</th>
</tr>
</thead>
<tbody>
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