

Adverse Weather and Health Plan

Cold Weather 2024 - 25



Summary of cold weather guidance

Cold weather and health: guidance and advice - GOV.UK

Guidance and advice	Link to UKHSA resource	
Adverse Weather and Health Plan	Adverse Weather and Health Plan - GOV.UK	
Public advice	Keeping warm and well: staying safe in cold weather -	
	GOV.UK	
	Keeping warm and well: staying safe in cold weather -	
	GOV.UK	
Cold weather and health:	Cold weather and health: supporting vulnerable people -	
supporting vulnerable people	GOV.UK	
For adult social care managers	Supporting vulnerable people before and during cold	
	weather: for adult social care managers - GOV.UK	
Healthcare professionals	Supporting vulnerable people before and during cold	
	weather: healthcare professionals - GOV.UK	
	Supporting vulnerable people before and during cold	
People homeless and sleeping rough	weather: people homeless and sleeping rough - GOV.UK	
Teachers and other educational	Looking after children and those in early years settings	
professionals	before and during cold weather: teachers and other	
professionals	educational professionals - GOV.UK	
Cold weather and health: action	Action health cards	
cards for professionals		
	Cold-Health Alert action card for commissioners - GOV.UK	
Commissioners		
	Cold-Health Alert summary action card for commissioners	
Hoolth and assist save analytidans	Cold-Health Alert action card for health and social care	
Health and social care providers	providers - GOV.UK	
	Cold thought Along a consequence of the cold to cold the cold to	
	Cold-Health Alert summary action card: hospitals	
	Action card summary poster - healthcare	
	Action card summary poster - nearthcare	
	Cold-Health Alert Summary action card: people in their	
	homes	
	nomes	
	Cold-Health Alert action card for the voluntary and	
	community sector - GOV.UK	
Voluntary and community sector	Samuel Section Services	
	Cold-Health Alert summary action card for voluntary and	
	community sector	
Health risks of cold homes: data	Health risks of cold homes: data sources - GOV.UK	
sources		
	i l	

Weather-health alerting system

Stakeholders are advised to sign up to Weather-Health alerts which are distributed via email.

Service	Link to resource
Weather-Health Alerting System registration form	Register here
Weather-health alerting system: user guide	<u>User guide</u>
Weather-Health Alerts	<u>Alerts</u>
Weather Ready	WeatherReady - Met Office

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I. Introduction

The <u>Adverse Weather and Health Plan</u> provides an overview of cold weather risks and gives advice to help prevent the major avoidable effects on health during periods of cold weather in England. This national plan, published by the United Kingdom Health Security Agency (UKHSA), aims to protect individuals and communities from the health effects of adverse weather and to build community resilience. The plan is focused on addressing the following 4 important goals due to adverse weather events:

- Prevent the increase in years of life lost
- Prevent mortality
- Prevent morbidity
- Reduce the use of healthcare services

UKHSA's cold weather resources to help prevent the major avoidable effects of cold weather on health are available in full here: Cold weather and health: guidance and advice - GOV.UK

The East Riding of Yorkshire Council's cold weather plan provides an overview of cold weather risks and focuses on actions for system partners to prepare and respond appropriately.

2. Aim of the East Riding of Yorkshire Council's cold weather plan

The cold weather plan is a key framework intended to protect the population from the harms to health from cold weather. The plan aims to support winter preparedness and resilience across all sectors and forms part of the wider response to reduce the number of excess winter deaths.

3. Definition of excess winter deaths

Excessive winter deaths are the additional number of deaths in the winter (December – March) from the average deaths over the year. These deaths are caused by avoidable factors such as:

- poor housing quality
- circulating infectious diseases
- physical hazards
- health inequalities

If preventative actions are in place, these actions help avoid excess deaths and illnesses. Office for national statistics data for winter mortality estimates that 13,400 more deaths occurred in the winter period (December 2021 to March 2022) compared with the average of the non-winter periods in England and Wales.

4. Groups at greater risk of harm from cold weather

As cold weather arrives, some members of the population are at greater risk of poor health outcomes:

- Older people, especially those over 65 years old
- Older people who are frail and/or socially isolated
- People with pre-existing chronic medical conditions such as cardiovascular and respiratory conditions, chronic obstructive pulmonary disease (COPD) and asthma, and diabetes
- Children under the age of five
- People with mental ill-health that may reduce the individual's ability to self-care (including dementia)
- People with learning difficulties
- People assessed as being at risk of or having had recurrent falls over 65s are more at risk of falls and home hazards increase this risk, which may be exacerbated by being indoors for long periods
- · People who are housebound or otherwise have low mobility

- People living on a low income or in deprived circumstances
- People who are living in households experiencing fuel poverty
- People experiencing homelessness or rough sleeping
- Pregnant women (particularly the potential impact of cold on the foetus)

As the temperature drops, the longer exposure to the cold can lead to an increased risk of death. For the atrisk cohorts (as listed above), longer exposure to the cold can lead to risk of heart attacks, strokes, pneumonia, depression, worsening arthritis, and hypothermia.

5. The impact of cold weather on health and wellbeing

The cold weather has a wide range of health and wellbeing impacts. Exposure to cold weather can directly and indirectly affect health and wellbeing.

Respiratory diseases include chronic disorders such as asthma and chronic obstructive pulmonary disease (COPD) and acute disorders due to infections (e.g. seasonal flu, pneumonia). Temperature changes can have a direct effect on respiratory conditions, exacerbating symptoms, particularly in prolonged periods of cold which can increase the risk of mortality from respiratory disease.

Cardiovascular diseases (CVDs) are disorders of the heart and blood vessels and include hypertension, coronary heart disease (e.g. angina, heart attack), and cerebrovascular disease (e.g. stroke). In many countries, including the UK, the incidence of CVDs is highest during winter months mainly due to the health effects of prolonged lower temperatures. A 1°C decrease in temperature during the cold months has been found to significantly increase the risk of mortality from CVD among those aged 65 and over by 1.7%. Winter months are also associated with a greater number of CVD-related hospitalisations from conditions such as heart failure and heart attacks compared to the summer months.

Unintentional injuries from falls and road traffic injuries increase in the winter months due to cold temperatures creating slippery conditions. Colder temperatures can lead to behavioural changes such as spending more time indoors and reduced physical activity. For older adults, this has been associated with slower reaction times and reduced bone density which can lead to increased risk of falls/trips and worse outcomes of falls.

Hypothermia-related mortality occurs all year round, with a pronounced seasonal peak between December-February and on days with lower ambient temperatures (<1°C). Mortality caused by hypothermia is often linked with drug and/or alcohol use (which affects thermoregulation). Hypothermia can affect individuals with Alzheimer's, rough sleepers and individuals with mobility issues who are unable to regulate their environmental temperature.

Mental health is believed to be affected by seasonal changes, with darker and colder days having an impact on individual's moods and motivation. Shorter days and lack of sufficient natural light in winter is associated with increased problems of disrupted sleep patterns, reduced sleeping efficiency and daytime fatigue, which can negatively affect mental health and mood. However, studies generally report no significant relationship between winter (low temperatures, high rainfall) and mental health impacts.

6. The impacts of respiratory infections and winter risks

As we continue to explore the long-term effects of respiratory infections, including flu and COVID-19 on the body, it is highly possible that exposure to cold weather can put an individual at greater risk of ill-health and death. The link between respiratory infections is yet unknown, however, there is emerging evidence of poorer health outcomes in those who are co-infected with COVID-19 and flu.

There are similarities between COVID-19 and the seasonal flu:

- Both illnesses can cause fever, cough, and body aches
- Both can result in pneumonia
- Both can be mild or severe or fatal.
- Both spread in a similar way of droplets or smaller virus particles from a sick person can transmit the virus to other people

 Both can be prevented by maintain good hand hygiene, limiting contact with people who are infected and socially distancing from those who are infected

7. The impacts of respiratory infections and fuel poverty

Public health research links fuel poverty with poor health. The British Medical Journal article warns that "urgent measures must be taken now to protect households at risk." (Whitehead, Taylor-Robinson, Barr, 2022.) Evidence suggests, for older people living in cold conditions, the risk of strokes and heart attacks are more common. Respiratory diseases (including flu) and falls, injuries and hypothermia are more common. Children growing up in cold, damp and mouldy homes with inadequate ventilation have higher than average rates of respiratory infections and asthma, chronic ill health, and disability.

Fuel poverty has been linked to winter respiratory hospital admissions in those aged 65 and over, with poor energy ratings of dwellings a stronger predictor than deprivation. Households that are relatively fuel poor are at significant risk of winter morbidity by living in a cold and damp dwelling, with limited means to afford adequate heating during the winter months. Households can be cold without falling into fuel poverty, and the coldest homes are not necessarily the poorest. Fuel poverty relates to households that cannot meet their energy needs to heat their homes at a reasonable cost. The likelihood of falling into fuel poverty is dependent upon multiple factors including:

- Domestic energy prices
- Household income
- Energy efficiency of the home

It is important to address potential risk factors associated with the dual risk of cold and respiratory infections. The impact of being exposed to both the cold weather and respiratory infections can have a much more severe impact on individuals. Indirect impacts on individuals could be increased exposure to cold temperatures due to limited to access to warm public space and increased in fuel poverty at home. Long-term impact on the mental health due to reduced access to social and community networks. In addition to change in patterns of health and social care use, access and delivery and health seeking behaviour.

8. Spotting the signs of a cold home and recommended living temperatures

It is important to be able to spot the signs of a cold home to enable changes to be made. Key signs of spotting a cold home are:

- 1. It feels cold in the house do you have to keep a coat on
- 2. Damp patches on walls
- 3. Condensation, wetness on windows and windowsills.
- 4. Draughts, through windows, doors and floors
- 5. Blocked vents to stop the cold getting in
- 6. No (or not using) central heating
- 7. Safety issues overloaded plug sockets, clothes or furnishings near heaters/fires.

8.1 Recommended indoor temperatures

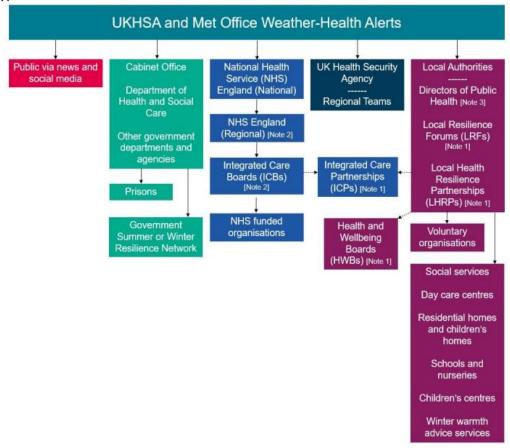
Living in temperatures below the recommended $16-21^{\circ}C$ (or recommended $18^{\circ}C$ and over in living areas) can impact on health. The table (below) shows the correlation between temperature and health:

Table I: Effects of living temperatures		
21°C	Recommended living room temperature	
18°C	Minimum temperature with no health risk, though may feel cold	
Under 16°C	Resistance to respiratory diseases may be diminished	
9-12°C	-12°C Increases blood pressure and risk of cardiovascular disease	
5°C	High risk of hypothermia	

9. Weather-health alert levels

The weather-health alert system comprises five levels of response based on cold weather thresholds. Cold health alerts can be accessed here.

Typical cascade of weather-health alerts is outlined here:



Source: Adverse Weather and Health Plan, UKHSA

The thresholds have been developed and agreed nationally to trigger an alert when severe cold weather is likely to significantly affect people's health. The alerts take account of temperature along with other winter threats such as ice and snow.

Table 2: Cold weather health alerts		
Level 0	Long-term planning Year-round planning is necessary so that longer term actions, such as those linked to spatial planning and housing, are taken to reduce the harm to health of significant cold periods when they occur.	
Level I	Winter preparedness and action programme	
Level 2	Severe winter weather is forecast – alert and readiness Mean temperature of 2°C and/or widespread ice and heavy snow are predicted within 48 hours, with 60% confidence.	
Level 3	Response to severe winter weather – Severe weather action Severe winter weather is now occurring - mean temperature of 2°C or less and/or widespread ice and heavy snow.	
Level 4	Major incident – Emergency response Central Government will declare a level 4 alert in the event of severe or prolonged cold weather affecting sectors other than health	
Source: Met Office		

10. East Riding of Yorkshire Council - responding to the adverse weather health plan

This list is not exhaustive and should be used as a general guide for partners across the system.

10.1 Level 0 - Long term planning

Recommendations	Actions
Increase emphasis of this level because of evaluation findings that the majority of the burden of cold-related ill health occurs at moderate outdoor winter temperatures (from 4-8 °C depending on region)	
Work with partner agencies to ensure that cold weather planning features within wider winter resilience planning	Partnership group established - Emergency planning group
Work with partners to ensure that a strategic approach to the reduction of excess winter deaths (EWD) and fuel poverty is taken across the local health and social care economy	Affordable warmth strategy in place
 Work with partner agencies to: Develop a shared understanding of EWDs and what partners can do to reduce them Identify those most at risk from seasonal variations Improve winter resilience of those at risk Ensure a local, joined-up programme is a place to support improved housing, heating and insulation, including uptake of energy-efficient, low carbon solutions Achieve a reduction in carbon emissions and assess the implications of climate change 	Joint working with the integrated care board (ICB)
Consider how your winter plans can help to reduce health inequalities, how they might target high risk groups and address the wider determinants of health	 Health through Warmth programme East Riding venues are opening welcoming places, offering warm social spaces Staff training Continue to engage with other sectors, support people via community Hub Continue to increase availability and accessibility of the flu vaccine in all community groups across the ERYC Identify hard to reach communities, support and promote flu vaccines and support available to them.
Ensure that organisations and staff are prompted to signpost vulnerable clients to key contacts e.g., energy efficiency measures, benefits or related advice	Severe weather advice from ERYC
Work with partners and staff on risk reduction awareness e.g. flu vaccination for staff in flu season, information and education	Communication and activity plan in place
engage with local CVS organisations for planning and implementation of all stages of the plan	Key links and information distributed via a range of meetings including the community partnership groups. Media updates throughout the season

10.2 Level I - Winter preparedness and action programme (I November to 31 March)

Recommendations	Actions
Increase emphasis of this level because of evaluation findings that most of the	
burden of cold-related ill health occurs at moderate outdoor winter temperatures (from 4-8 °C depending on region)	
Communicate public health media messages	Joint campaign incorporating radio messages, bus adverts, social media and press coverage. Alert messages will go out timely as required. Targeted approach communications to be reviewed this winter Information of cold weather and effects on health is available on the ERYC website. Materials/resources to be produced accordingly where needed to raise awareness.
Communicate revised Cold Weather Plan 2019	New plan widely circulated.
Ensure key partners, including all managers of care, residential and nursing homes are aware of alerts system and can access advice	Information circulated. Alerts cascaded
Review the distribution of the cold weather alerts across the system and ensure staff are aware of winter plans and advice	Assurance measures in place Staff briefed on winter plans and their role and responsibilities
Ensure that local organisations and professionals are taking appropriate actions considering the cold weather alerts in accordance with the local and national cold weather plan	Assurance plan in place
Ensure that organisations and staff are prompted to signpost vulnerable clients onwards (e.g. for energy efficiency measures, benefits or related advice)	Stay well this winter campaign resources circulated Keep warm and keep well campaign resources circulated
Liaise with providers of emergency shelter for homeless people to agree plans for severe weather and ensure capacity to scale up provision	
Support communities to help those at risk. Support the development of Community emergency plans	Parish councils aware of new adverse weather and health plan and to update emergency plans
Identify which local health, social care and voluntary sector organisations are most vulnerable to the effects of winter weather. Agree plans for winter surge in demand for services. Make sure emergency contacts are up to date	Key contact information updated

10.3 Level 2: Severe winter weather is forecast – alert and readiness

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

Recommendations	Actions
Continue to communicate public health media messages	Communication plan in place
Communicate alerts to staff and make sure that they can take appropriate actions	Staff briefed on winter plans and their role and responsibilities Communication channels in place (ERYC mailbox and established groups)
Ensure key partners, including all managers of care, residential and nursing homes, are aware of the alerts and can access Department of Health and other advice	Channels of communication place All managers are aware of the alert system
Ensure that organisations and staff are prompted to signpost vulnerable clients onwards (e.g. for energy efficiency measures, benefits or related advice) Support local community organisations to activate community emergency plans	Community engagement plan in place (community hub, engaging with community sectors
Activate business continuity arrangements and emergency plans as required	Business continuity plan gives specific actions re cold weather to maintain resilience across systems
Consider how to make best use of available capacity, for example by using community beds for at-risk patients who do not need an acute bed and enabling access to step-down care and reablement	System call group in place
Work with partner agencies (e.g. transport) to ensure road/ pavement gritting preparations are in place to allow access to critical services and pedestrian hotspots	

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

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

Recommendations	Actions	
Continue to communicate public health media messages	Communication plan in place	
Communicate alerts to staff and make sure that winter plans are in operation	Alert system in place	
Ensure key partners are undertaking action in response to alerts	Assurance provided	
Support local community organisations to mobilise community emergency plans	Assurance provided	
Ensure continuity arrangements are working with provider organisations	Providers alert commissioners of any difficulties to contracted services	
Work with partner agencies (e.g. transport) to ensure road and pavement gritting		
arrangements are in effect to allow access to critical services and pedestrian		
hotspots		

10.5 Level 4: Major incident - emergency response

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

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

11. Key public health messages

There are several key public health messages that can be used in preparation, response and for communication during cold weather and the winter months. Here are some of the key messages:

11.1 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 (see page 40 for full advice).
- 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 three 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 sold fuel if you are not on mains gas or electricity- to make sure you do not run out in winter

11.2 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

11.3 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 five daily portions of fruit and vegetables. Tinned and frozen vegetables count toward your five 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

11.4 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

11.5 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
- Cost of living ERYC help for households' support fund can be accessed here

11.6 Access the flu vaccination

The flu vaccine is available at:

- Your GP surgery
- A pharmacy offering the service
- Your midwifery service if you are pregnant

Annual flu programme information and list of eligible groups is here

11.7 Access the COVID-19 vaccination

Anyone who gets COVID-19 can become seriously ill or have long-term effects (long COVID). The COVID-19 vaccines are the best way to protect yourself and others.

Research has shown the vaccines help:

- Reduce your risk of getting seriously ill or dying from COVID-19
- Reduce your risk of catching or spreading COVID-19
- Protect against COVID-19 variants

To find out how to get your COVID-19 vaccine and to check the eligible groups, <u>look here</u> and to find out more information about COVID-19 visit the NHS website here.

12. Recommended next steps for the NHS and local authorities

The Adverse Weather and Health Plan (AWHP) is a good-practice document. It is up to each local authority and its NHS partners to consider the actions in this plan; adapt them and incorporate them as appropriate to the local situation, as a component of wider winter planning arrangements. Local teams from NHS England and UKHSA can support, advise and co-ordinate these arrangements as required.

There are five key messages for all local areas, especially considering any recent structural changes:

- I. All Local Authorities, NHS commissioners and their partner organisations should consider the AWHP for England and satisfy themselves that the suggested actions and the weather health alert service are understood across their locality. Local cold weather and winter plans should consider this plan.
- 2. NHS and Local Authority commissioners should review or audit the distribution of the weather health alerts across the local health and social care systems to satisfy themselves that the **alerts reach those that need to take appropriate actions**, immediately after issue. Local areas need to adapt a cascade system to their situations and ensure that the cascades are working appropriately.
- 3. NHS and local authority commissioners should assure themselves that **organisations and key stakeholders are taking appropriate actions** in line with the weather health alerts. The actions identified are based on the best evidence and practice available but are illustrative. It is for local areas to amend and adapt this guidance and to clarify procedures for staff and organisations in a way which is appropriate for the local situation. As ever, it is for professionals to use their judgement in any individual situation to ensure that they are doing the best they can for their patient or client.
- 4. The **voluntary and community sector** can help reduce vulnerability and support the planning and response to cold weather, particularly through identifying and engaging vulnerable people. NHS and local authority commissioners and providers should take opportunities for closer partnership working with these groups.
- 5. Reducing excess winter illness and death is not something that can be tackled in the winter alone. It requires a long-term strategic approach by health and wellbeing boards (HWBs), directors of public health and commissioners to assess needs and then commission, plan and implement interventions. Action to reduce cold-related harm both within and outside the home should be considered **core business by HWBs** and included in |SNAs and |HWSs.

13. Summary of cold weather action

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
	Long-term planning All Year	Winter preparedness and action 1 November to 31March	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	Take strategic approach to reduction of EWDs and fuel poverty. Ensure winter plans reduce health inequalities. Work with partners and staff on risk reduction awareness (eg flu vaccinations, signposting for winter warmth initiatives.	Communicate alerts and messages to staff/public/media. Ensure partners are aware of alert system and actions. 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
Provider organisations	Ensure organisation can identify and support most vulnerable. Plan for joined up support with partner organisations. Work with partners and staff on risk reduction awareness (eg flu vaccinations, signposting for winter warmth initiatives.	Ensure cold weather alerts are going to right staff and actions agreed and implemented. Ensure staff in all settings are considering room temperature. Ensure data sharing and referral arrangements in place.	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.	Contingencies Secretariat (COS) based in the Cabinet Office. All level 3 responsibilities to be maintained
Frontline staff- care facilities and community	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 vaccinations.	Identify vulnerable clients on caseload; ensure care plans incorporate cold risk reduction. Check room temperatures and ensure referral as appropriate. Signpost clients to other services using 'Keep Warm Keep Well' booklet.	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.	1) Continue level 2 actions. 2) Implement emergency and business continuity plans; expect surge in demand in near future. 3) Prioritise those most vulnerable.	unless advised to the contrary.
GPs and their staff	Be aware of emergency planning measures relevant to general practice. Ensure staff aware of local services to improve warmth in the home including the identification of vulnerable individuals. Signpost appropriate patients to other services when they present for other reasons.	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.	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.	1) Continue level 2 actions. 2) Expect surge in demand near future. 3) Ensure staff aware of cold weather risks and can advise appropriately.	

14. Adverse weather and health (cold) resources

	Adverse weather and hearth (cold) resources				
Topic	Source	Link to information			
Adverse Weather and Health	UKHSA	<u>Plan</u>			
Plan					
Cold weather and health:	UKHSA	Action health cards			
action cards, 2024 - 25					
Keeping warm and well:	UKHSA	Advice			
staying safe in cold weather					
Cold weather and health:	UKHSA	<u>Information</u>			
supporting vulnerable people					
 For adult social care 					
managers					
- Healthcare					
professionals					
- People homeless and					
sleeping rough					
- Teachers and other					
educational					
professionals					
Helping to prevent winter	National Institute for Health	Helping to prevent winter			
deaths and illnesses associated	and Care Excellence (NICE)	deaths and illnesses associated			
with cold homes: a quick guide	,	with cold homes Quick			
for home care managers		guides to social care topics			
_		Social care NICE			
		Communities About NICE			
Weather-health alerting	UKHSA	User guide			
system: user guide					
Weather-Health Alerts	UKHSA and Met Office	Alerts			
Weather-Health Alerting	UKHSA and Met Office	Register here			
System registration form					
COVID-19 vaccinations	NHS	<u>Information</u>			
Flu vaccinations and eligibility	NHS and UKHSA	Annual flu programme			

15. References

Topic	Source	Link to information
Winter mortality in England and Wales: 2021 to 2022 (provisional) and 2020 to 2021 (final)	Office for National Statistics	Website link
How fuel poverty is measured in the UK: March 2023	Office for National Statistics	<u>Fuel poverty</u>
Tracking the impact of winter pressures in Great Britain: November 2022 to February 2023	Office for National Statistics	Winter survey
Fuel poverty is intimately linked to poor health	The British Medical Journal: Whitehead, Taylor-Robinson, Barr, 2022	<u>Article</u>